

# 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  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO Box 3241  
 Check if different than previously reported. (ACC)  
Cheyenne WY 82003

2. **FEC IDENTIFICATION NUMBER** C00392134  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 01 01 2010 through 03 31 2010

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 Mrs. S. Danielle Davis Enzi

Signature of Treasurer Electronically Filed by Mrs. S. Danielle Davis Enzi Date 04 14 2010

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)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		95950.47
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	95950.47									
(c) Total Receipts (from Line 19) .....	40000.00	40000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	135950.47	135950.47								
7. Total Disbursements (from Line 31) .....	77396.93	77396.93								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	58553.54	58553.54								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

Report Covering the Period: From:    To:

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) .....	2000.00	2000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2000.00	2000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	38000.00	38000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	40000.00	40000.00
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)) .....	40000.00	40000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40000.00	40000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	22396.93	22396.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	22396.93	22396.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	55000.00
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 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))..	77396.93	77396.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77396.93	77396.93

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

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) .....	40000.00	40000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40000.00	40000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22396.93	22396.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	22396.93	22396.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Kara Calvert

Mailing Address 241 Warren Street, NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Franklin Square Group Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2010

Transaction ID: SA11AI.5130

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
John L. Kemmerer, III

Mailing Address PO Box 6848

City State Zip Code  
Jackson WY 83002

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

Name of Employer Kemmerer Resources Corporation Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 27 / 2010

Transaction ID: SA11AI.5116

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	2000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 Beach Street

City San Francisco State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
03 / 05 / 2010

**Transaction ID:** SA11C.5114

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
ASSISTED LIVING FEDERATION OF AMERICA

Mailing Address 1650 King Street Suite 602

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00338020

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2010

**Transaction ID:** SA11C.5122

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
BANK OF AMERICA CORPORATION PAC (FKA MBNA CORPORATION FEDERAL POLITICAL COMMITTEE)

Mailing Address 1100 North King Street DE5-001-02-07

City Wilmington State DE Zip Code 19884

FEC ID number of contributing federal political committee. **C** C00252866

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2010

**Transaction ID:** SA11C.5109

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9000.00

**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 8 / 24  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1310 G STREET NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2010

**Transaction ID:** SA11C.5185

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 3699 WILSHIRE BLVD., #1290

City State Zip Code  
LOS ANGELES CA 90010

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2010

**Transaction ID:** SA11C.5110

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
FEDERAL EXPRESS POLITICAL ACTION COMMITTEE

Mailing Address 942 South Shady Grove Road

City State Zip Code  
Memphis TN 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2010

**Transaction ID:** SA11C.5124

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00

**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 9 / 24

(check only one)

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

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NAME OF COMMITTEE (In Full)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 18254

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 13 / 2010

Transaction ID: SA11C.5108

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 Daingerfield Road

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2010

Transaction ID: SA11C.5128

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC

Mailing Address 1655 N. Fort Myer Dr.  
Suite 850

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2010

Transaction ID: SA11C.5121

Amount of Each Receipt this Period

2500.00

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

8500.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 24

(check only one)

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

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NAME OF COMMITTEE (In Full)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Mailing Address 1025 CONNECTICUT AVENUE N.W.  
SUITE 1104

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2010

**Transaction ID:** SA11C.5126

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS, INC.

Mailing Address 430 First St. SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 19 / 2010

**Transaction ID:** SA11C.5111

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St., NW  
Suite 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2010

**Transaction ID:** SA11C.5125

Amount of Each Receipt this Period  
1000.00

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 24  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 Bren Road East  
9900 BREN ROAD EAST

City State Zip Code  
Minnetonka MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 9 / 2 0 1 0

**Transaction ID:** SA11C.5113

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 1 0

**Transaction ID:** SA11C.5118

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
US ONCOLOGY INC. GOOD GOVERNMENT COMMITTEE

Mailing Address 10101 Woodloch Forest Drive  
Suite 1300

City State Zip Code  
The Woodlands TX 77380

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 1 0

**Transaction ID:** SA11C.5132

Amount of Each Receipt this Period  
650.00

In-kind - fundraising expenses

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7150.00**

**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 12 / 24	
	(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"/> 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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) US ONCOLOGY INC. GOOD GOVERNMENT COMMITTEE		Date of Receipt	
	Mailing Address 10101 Woodloch Forest Drive Suite 1300		M M / D D / Y Y Y Y 03 / 30 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11C.5119
	The Woodlands	TX	77380	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C C00339655		4350.00	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	38000.00

**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 13 / 24

<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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Charlie Palmer	Transaction ID: SB21B.5186 Date of Disbursement MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 101 Constitution Ave., NW	Amount of Each Disbursement this Period 300.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Fundraiser lunch for Making Business Excel PAC	003 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Charlie Palmer	Transaction ID: SB21B.5198 Date of Disbursement MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 101 Constitution Ave., NW	Amount of Each Disbursement this Period 790.65
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Fundraising lunch for making business excel pac	003 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) ENZI FOR US SENATE	Transaction ID: SB21B.5178 Date of Disbursement MM / DD / YYYY 03 / 29 / 2010
	Mailing Address PO BOX 2775	Amount of Each Disbursement this Period 672.25
	City CODY State WY Zip Code 82414	
	Purpose of Disbursement Reimburse expense for fundraiser	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: WY District: 00	

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1090.65
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.5178**

Payment for dinner for Making Business Excel PAC fundraiser accidentally paid for Enzi for Senate in September 2009. This reimburses Enzi for Senate completely for the expense so that there is no contribution.

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

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

FOR LINE NUMBER: (check only one)

PAGE 15 / 24

<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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Enzi Strategies, LLC	Transaction ID: SB21B.5135 Date of Disbursement 01 / 02 / 2010
	Mailing Address 411 McGarry Drive	Amount of Each Disbursement this Period 12850.00
	City Cheyenne State WY Zip Code 82009	
	Purpose of Disbursement commission for 2009 monies raised	001 Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Enzi Strategies, LLC	Transaction ID: SB21B.5137 Date of Disbursement 01 / 02 / 2010
	Mailing Address 411 McGarry Drive	Amount of Each Disbursement this Period 2000.00
	City Cheyenne State WY Zip Code 82009	
	Purpose of Disbursement monthly retainer-Memo attached	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Enzi Strategies, LLC	Transaction ID: SB21B.5159 Date of Disbursement 01 / 28 / 2010
	Mailing Address 411 McGarry Drive	Amount of Each Disbursement this Period 2240.00
	City Cheyenne State WY Zip Code 82009	
	Purpose of Disbursement	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	14850.00
<b>TOTAL</b> This Period (last page this line number only) .....	

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.5137**

Monthly retainer includes all basic service as well as utilities and all basic costs associated with fundraising and reporting, therefore there will be no costs related to utilities except for phone/e-mail fax service.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.5159**

monthly retainer of \$200 plus expenses equaling \$240 for cell phone expenses.



# 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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Enzi Strategies, LLC</p> <p>Mailing Address 411 McGarry Drive</p> <p>City Cheyenne State WY Zip Code 82009</p> <p>Purpose of Disbursement Reimbursed Expenses for mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5165</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="532.35"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Enzi Strategies, LLC</p> <p>Mailing Address 411 McGarry Drive</p> <p>City Cheyenne State WY Zip Code 82009</p> <p>Purpose of Disbursement monthly retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5166</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Enzi Strategies, LLC</p> <p>Mailing Address 411 McGarry Drive</p> <p>City Cheyenne State WY Zip Code 82009</p> <p>Purpose of Disbursement Reimbursed Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5170</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.5165**

Reimbursed expense for mileage. Travel to Jackson Hole, WY for fundraising event for Making Business Excel PAC.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.5170**

Reimbursed Expenses: Phone for January-June- \$120.00

# 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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Enzi Strategies, LLC

Mailing Address 411 McGarry Drive

City Cheyenne State WY Zip Code 82009

Purpose of Disbursement  
Reimbursed Expense  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.5171  
Date of Disbursement

02 / 27 / 2010

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Enzi Strategies, LLC

Mailing Address 411 McGarry Drive

City Cheyenne State WY Zip Code 82009

Purpose of Disbursement  
retainer  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.5172  
Date of Disbursement

03 / 02 / 2010

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)  
Mrs. Sandi Rewerts

Mailing Address

City Cheyenne State WY Zip Code 82009

Purpose of Disbursement  
administrative work  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.5168  
Date of Disbursement

02 / 23 / 2010

Amount of Each Disbursement this Period

260.00

SUBTOTAL of Disbursements This Page (optional) ▶

2260.00

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

A. Form/Schedule : **SB21B**

Reimbursed expense for J connect fax service- \$180.00

Transaction ID : **SB21B.5171**

**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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Snake River Lodge and Spa	Transaction ID: SB21B.5187 Date of Disbursement
	Mailing Address 7710 Granite Loop Rd.	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Teton Village, State WY Zip Code 83025	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging during Making Business Excel Event	<input type="text" value="349.92"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Teton Mountain Lodge	Transaction ID: SB21B.5196 Date of Disbursement
	Mailing Address Teton Village Loop	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Teton Village, State WY Zip Code 83025	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging, Making Business Excel PAC event	<input type="text" value="869.65"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US ONCOLOGY INC. GOOD GOVERNMENT COMMITTEE	Transaction ID: SB21B.5133 Date of Disbursement
	Mailing Address 10101 Woodloch Forest Drive Suite 1300	<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City The Woodlands, State TX Zip Code 77380	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - fundraising expenses	<input type="text" value="650.00"/>
	Candidate Name	<input type="text"/> 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1869.57"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="22070.22"/>

# 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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A. FRIENDS OF BOB BENNETT SENATORIAL CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 175 SOUTH WEST TEMPLE SUITE 650

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
ROBERT F BENNETT

Office Sought:  House  Senate  President  
State: UT District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
Special-Primary

Transaction ID: SB23.5179  
Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

5000.00

**B. FRIENDS OF JOHN MCCAIN INC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 16664

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
JOHN S MCCAIN

Office Sought:  House  Senate  President  
State: AZ District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5176  
Date of Disbursement

03 / 19 / 2010

Amount of Each Disbursement this Period

5000.00

**C. GRASSLEY COMMITTEE INC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
CHARLES E SENATOR GRASSLEY

Office Sought:  House  Senate  President  
State: IA District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5143  
Date of Disbursement

01 / 13 / 2010

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) GRASSLEY COMMITTEE INC <hr/> Mailing Address PO BOX 1000 <hr/> City DES MOINES State IA Zip Code 50304 <hr/> Purpose of Disbursement <hr/> Candidate Name CHARLES E SENATOR GRASSLEY <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5173 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) HOEVEN FOR SENATE <hr/> Mailing Address PO BOX 15114 <hr/> City ARLINGTON State VA Zip Code 22215 <hr/> Purpose of Disbursement <hr/> Candidate Name JOHN HOEVEN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5180 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2010
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) KIRK FOR SENATE <hr/> Mailing Address P.O. Box 8 <hr/> City Winnetka State IL Zip Code 60093 <hr/> Purpose of Disbursement <hr/> Candidate Name MARK STEVEN KIRK <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5162 Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2010
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

**A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 425 SECOND STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

annual Donation

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.5140

Date of Disbursement

01 / 13 / 2010

Amount of Each Disbursement this Period

15000.00

**B. PORTMAN FOR SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement

Candidate Name  
ROB PORTMAN

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 00

Transaction ID: SB23.5150

Date of Disbursement

01 / 13 / 2010

Amount of Each Disbursement this Period

5000.00

**C. SCOTT BROWN FOR US SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 395

City WRENTHAM State MA Zip Code 02903

Purpose of Disbursement

Candidate Name  
SCOTT P BROWN

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MA District: 00

Transaction ID: SB23.5153

Date of Disbursement

01 / 13 / 2010

Amount of Each Disbursement this Period

5000.00

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

25000.00

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

55000.00