

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 Dam PAC

ADDRESS (number and street) PO Box 751271 Las Vegas NV 89136 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00410993 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2006 through 06 30 2006

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

Type or Print Name of Treasurer Chrissie Hastie

Signature of Treasurer Electronically Filed by Chrissie Hastie Date 07 15 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Dam PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		7189.37
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	20513.02									
(c) Total Receipts (from Line 19) .....	11698.08	26027.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	32211.10	33216.45								
7. Total Disbursements (from Line 31) .....	10359.94	11365.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21851.16	21851.16								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Dam PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	8733.08	9733.08
(i) Itemized (use Schedule A) .....	465.00	3694.00
(ii) Unitemized .....	9198.08	13427.08
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	2500.00	12600.00
(c) Other Political Committees (such as PACs) .....	11698.08	26027.08
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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)) .....	11698.08	26027.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11698.08	26027.08

**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.....	4359.94	5365.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4359.94	5365.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	6000.00
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))..	10359.94	11365.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	10359.94	11365.29

**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) .....	11698.08	26027.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11698.08	26027.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4359.94	5365.29
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4359.94	5365.29

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or 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) Dam PAC
--

A. Full Name (Last, First, Middle Initial) Station Casinos PAC	
Mailing Address 2411 W. Sahara Avenue	
City Las Vegas	State NV
Zip Code 89102	
FEC ID number of contributing federal political committee.	C
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Transaction ID: 60531.C33
Amount of Each Receipt this Period 2500.00
Receipt

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

**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 7 / 16
	<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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John Bielinski		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 2310 Highland Drive		Transaction ID: 60531.C36	
City State Zip Code Las Vegas NV 89102	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	In-Kind Catering		
Name of Employer Occupation Ad America President	Aggregate Year-to-Date 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B.</b> 5 Star Strategic Solutions LLC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 7936 W. Sahara Avenue		Transaction ID: 60531.C37	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 1974.52		
FEC ID number of contributing federal political committee. C	In-Kind Facility fees		
Name of Employer Occupation 5 Star Strategic Solutions Partner	Aggregate Year-to-Date 1974.52		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C.</b> Terry Murphy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 7936 W. Sahara Avenue		Transaction ID: 60531.C40	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 1974.52		
FEC ID number of contributing federal political committee. C	Memo [MEMO ITEM] Partnership->5 Star Strategic Solutions LLC		
Name of Employer Occupation 5 Star Strategic Solutions Partner	Aggregate Year-to-Date 2805.88		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2974.52
<b>TOTAL</b> 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 8 / 16
	<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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A.</b> 5 Star Strategic Solutions LLC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 7936 W. Sahara Avenue		<b>Transaction ID:</b> 60531.C38	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 758.56		
FEC ID number of contributing federal political committee. <b>C</b>	In-Kind Printing		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2733.08		

Full Name (Last, First, Middle Initial) <b>B.</b> Terry Murphy		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 7936 W. Sahara Avenue		<b>Transaction ID:</b> 60711.C62	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 758.56		
FEC ID number of contributing federal political committee. <b>C</b>	Memo <b>[MEMO ITEM]</b> Partnership->5 Star Strategic Solutions LLC		
Name of Employer Occupation 5 Star Strategic Solutions Partner	Aggregate Year-to-Date ▼ 831.36		

Full Name (Last, First, Middle Initial) <b>C.</b> 5 Star Strategic Solutions LLC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 7936 W. Sahara Avenue		<b>Transaction ID:</b> 60531.C39	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 72.80		
FEC ID number of contributing federal political committee. <b>C</b>	Memo <b>[MEMO ITEM]</b> Postage		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2733.08		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	758.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



**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 / 16
	<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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A. Terry Murphy</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 7936 W. Sahara Avenue		<b>Transaction ID: 60711.C61</b>	
City State Zip Code Las Vegas NV 89117	Amount of Each Receipt this Period 72.80		
FEC ID number of contributing federal political committee. C	Memo		
Name of Employer Occupation 5 Star Strategic Solutions Partner	<b>[MEMO ITEM]</b> Partnership->5 Star Strategic Solutions LLC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 72.80		

Full Name (Last, First, Middle Initial) <b>B. John Ritter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3455 Cliff Shadows Parkway Suite 220		<b>Transaction ID: 60531.C45</b>	
City State Zip Code Las Vegas NV 89129	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation Focus Group Developer	Receipt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Vincent Schettler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 3455 Cliff Shadows Parkway Suite 220		<b>Transaction ID: 60531.C46</b>	
City State Zip Code Las Vegas NV 89129	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Occupation Focus Group Developer	Receipt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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

# 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 10 / 16
	<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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Andrew Flaherty		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 3455 Cliff Shadows Parkway Suite 220		<b>Transaction ID:</b> 60531.C47
City Las Vegas State NV Zip Code 89129	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Focus Group Occupation Developer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Darrin Badger		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 3455 Cliff Shadows Parkway Suite 220		<b>Transaction ID:</b> 60531.C48
City Las Vegas State NV Zip Code 89129	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Focus Group Occupation Developer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kelly Schettler		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 10432 Summit Canyon Drive		<b>Transaction ID:</b> 60531.C49
City Las Vegas State NV Zip Code 89144	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer .Information Requested Occupation .Information Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> 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 / 16
	<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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Larry Bross		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 200 Royal Wood Court		Transaction ID: 60531.C50	
City State Zip Code Las Vegas NV 89148	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Landtek	Occupation Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lynn Westrom		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 8575 W. Washburn		Transaction ID: 60531.C51	
City State Zip Code Las Vegas NV 89149	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer FACT	Occupation Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas Devore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1809 Quarley Place		Transaction ID: 60531.C52	
City State Zip Code Henderson NV 89014	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 16
	(check only one)	
<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)  
Dam PAC

**A.** Full Name (Last, First, Middle Initial)  
Calvin Champlin

Mailing Address 2305 Delina Drive

City State Zip Code  
Las Vegas NV 89134

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

Name of Employer Occupation  
Quadrant Planning Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

**Transaction ID:** 60531.C53

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 2305 Delina Drive

City State Zip Code  
Las Vegas NV 89134

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

Name of Employer Occupation  
Quadrant Planning Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2006

**Transaction ID:** 60531.C54

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8733.08

# 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 / 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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A. 5 Star Strategic Solutions LLC</b>		<b>Transaction ID:</b> 60531.C371K <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 7936 W. Sahara Avenue		Amount of Each Disbursement this Period 1974.52
City Las Vegas      State NV      Zip Code 89117-		
Purpose of Disbursement FACILITY FEES		IN KIND: FACILITY FEES
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:		

Full Name (Last, First, Middle Initial) <b>B. Foundations Inc</b>		<b>Transaction ID:</b> 60531.E6 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 6
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 5.86
City Las Vegas      State NV      Zip Code 89136-		
Purpose of Disbursement PRINTING & POSTAGE		PRINTING & POSTAGE
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:		

Full Name (Last, First, Middle Initial) <b>C. 5 Star Strategic Solutions LLC</b>		<b>Transaction ID:</b> 60531.C381K <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 7936 W. Sahara Avenue		Amount of Each Disbursement this Period 758.56
City Las Vegas      State NV      Zip Code 89117-		
Purpose of Disbursement PRINTING		IN KIND: PRINTING
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2738.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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

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)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A. John Bielinski</b>		Transaction ID: 60531.C361K Date of Disbursement 04 / 21 / 2006	
Mailing Address 2310 Highland Drive		Amount of Each Disbursement this Period 1000.00	
City Las Vegas State NV Zip Code 89102-	Purpose of Disbursement CATERING	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) ▼	IN KIND: CATERING	

Full Name (Last, First, Middle Initial) <b>B. Foundations Inc</b>		Transaction ID: 60531.E5 Date of Disbursement 04 / 03 / 2006	
Mailing Address PO Box 751271		Amount of Each Disbursement this Period 500.00	
City Las Vegas State NV Zip Code 89136-	Purpose of Disbursement CONSULTING TREASURY	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) ▼	CONSULTING TREASURY	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	4238.94

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A. Fitzpatrick for Congress</b>		Transaction ID: 60623.E13 Date of Disbursement 06 / 23 / 2006
Mailing Address PO Box 1772		Amount of Each Disbursement this Period 1000.00  CONTRIBUTION
City Doylestown	State PA Zip Code 18901-	
Purpose of Disbursement CONTRIBUTION		
Candidate Name MICHAEL G FITZPATRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 08		

Full Name (Last, First, Middle Initial) <b>B. Friends of Mike Sodrel</b>		Transaction ID: 60623.E12 Date of Disbursement 06 / 23 / 2006
Mailing Address 702 N. Shore Drive Suite 500		Amount of Each Disbursement this Period 1000.00  CONTRIBUTION
City Jeffersonville	State IN Zip Code 47130-	
Purpose of Disbursement CONTRIBUTION		
Candidate Name MICHAEL E SODREL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 09		

Full Name (Last, First, Middle Initial) <b>C. Geoff Davis for Congress</b>		Transaction ID: 60711.E14 Date of Disbursement 06 / 29 / 2006
Mailing Address 3161 Dixie Highway Suite F		Amount of Each Disbursement this Period 1000.00  CONTRIBUTION
City Erlanger	State KY Zip Code 41018-	
Purpose of Disbursement CONTRIBUTION		
Candidate Name GEOFFREY C DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Dam PAC

Full Name (Last, First, Middle Initial) <b>A. Heather Wilson for Congress</b>		<b>Transaction ID:</b> 60623.E11 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address PO Box 14070		Amount of Each Disbursement this Period 1000.00  CONTRIBUTION
City Albuquerque State NM Zip Code 87191-	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name HEATHER A. WILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Heller for Congress</b>		<b>Transaction ID:</b> 60623.E9 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address PO Box 750850		Amount of Each Disbursement this Period 1000.00  PRIMARY CONTRIBUTION
City Las Vegas State NV Zip Code 89136-	Category/ Type	
Purpose of Disbursement PRIMARY CONTRIBUTION		
Candidate Name DEAN HELLER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jim Gerlach for Congress</b>		<b>Transaction ID:</b> 60623.E10 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address PO Box 87		Amount of Each Disbursement this Period 1000.00  CONTRIBUTION
City Uwchland State PA Zip Code 19480-	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name JIM GERLACH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	6000.00