

# 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)  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 07 01 2006 through 09 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 H. Scott Flegal

Signature of Treasurer Electronically Filed by H. Scott Flegal Date 12 29 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.

Office Use Only								
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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	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

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		218105.30
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	245560.31									
(c) Total Receipts (from Line 19) .....	25050.00	162550.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	270610.31	380655.30								
7. Total Disbursements (from Line 31) .....	105308.04	215353.03								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	165302.27	165302.27								
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  
White Mountain PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

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	5000.00	33000.00
(i) Itemized (use Schedule A) .....	0.00	115.00
(ii) Unitemized .....	5000.00	33115.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	20000.00	129385.00
(c) Other Political Committees (such as PACs) .....	25000.00	162500.00
(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 .....	50.00	50.00
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)) .....	25050.00	162550.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	25050.00	162550.00

**DETAILED SUMMARY PAGE**  
of Disbursements

<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.....	10249.51	14341.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	10249.51	14341.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	101100.00
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.....	60058.53	99911.62
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))..	105308.04	215353.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	105308.04	215353.03

**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) .....	25000.00	162500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25000.00	162500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10249.51	14341.41
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10249.51	14341.41

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 38
	<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	

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

Full Name (Last, First, Middle Initial) <b>A.</b> James F Febeo, Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 1 Charles Street South Unit 1012		Transaction ID: SA11A1.5553
City Boston State MA Zip Code 02116-5431	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer Fidelity Investments	Occupation Attorney	
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> Stephen P Jonas		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 34 1/2 Beacon St Apt 25		Transaction ID: SA11A1.5549
City Boston State MA Zip Code 02108	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer Fidelity Investments	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> David L Murphy		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 15 High Meadow Cir		Transaction ID: SA11A1.5555
City Wellesley State MA Zip Code 02482	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer Fidelity Investments	Occupation Senior Management, Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<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 7 / 38
	<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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. Steven C Nelson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 12 Village Woods Drive		Transaction ID: SA11A1.5551	
City <b>Amherst</b>	State <b>NH</b>	Zip Code <b>03031</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Fidelity Investments	Occupation Institutional Portfolio Manager		
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. Guy L Patton</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Prescott Ln		Transaction ID: SA11A1.5559	
City <b>Weston</b>	State <b>MA</b>	Zip Code <b>02493</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Fidelity Investments	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Richard A Spillane, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 4 Longmeadow Rd		Transaction ID: SA11A1.5557	
City <b>Wellesley</b>	State <b>MA</b>	Zip Code <b>02182</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Contribution	
Name of Employer Fidelity Investments	Occupation Financial Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	5000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 38
	<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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. AMERICAN ASSOCIATION OF AIRPORT EXECUTIVES GOOD GOVERNMENT COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 22 / 2006
Mailing Address 601 MADISON ST SUITE 400		<b>Transaction ID: SA11C.5544</b>
City State Zip Code ALEXANDRIA VA 22314	FEC ID number of contributing federal political committee. <b>C</b> C00176727	Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN ASSOCIATION OF AIRPORT EXECUTIVES GOOD GOVERNMENT COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006
Mailing Address 601 MADISON ST SUITE 400		<b>Transaction ID: SA11C.5546</b>
City State Zip Code ALEXANDRIA VA 22314	FEC ID number of contributing federal political committee. <b>C</b> C00176727	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. BLUEGRASS COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 09 / 2006
Mailing Address 400 North Capitol Street NW #585		<b>Transaction ID: SA11C.5540</b>
City State Zip Code Washington DC 20001	FEC ID number of contributing federal political committee. <b>C</b> C00235655	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
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) .....	▶	10000.00
<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 9 / 38
	<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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. BRYAN CAVE LLP POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006
Mailing Address 700 THIRTEENTH STREET NW SUITE 700		Transaction ID: SA11C.5541
City State Zip Code WASHINGTON DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00332643	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. COMCAST CORP. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 1500 Market Street 35th Floor		Transaction ID: SA11C.5545
City State Zip Code Philadelphia PA 19102	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00248716	Contribution	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>C. FPL PAC</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006
Mailing Address 700 Universe Blvd. P.O. Box 14000		Transaction ID: SA11C.5543
City State Zip Code Juno Beach FL 33408	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00064774	Contribution	
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) ..... ▶	5000.00
<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:	PAGE 10 / 38
	(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)  
White Mountain PAC

Full Name (Last, First, Middle Initial)  
**A. JACOBS GOOD GOVERNMENT FUND OF JACOBS ENGINEERING GROUP INC.**

Mailing Address 1111 South Arroyo Parkway

City State Zip Code  
Pasadena CA 91105

FEC ID number of contributing federal political committee. **C** C00142299

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11C.5547

Amount of Each Receipt this Period  
5000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	20000.00

**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 11 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. AMERICAN HOSPITAL ASSOCIATION PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 325 Seventh Street NW Suite 700		Transaction ID: SA12.5686
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00106146	[MEMO ITEM]	
Name of Employer Occupation	Aggregate Year-to-Date .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ASHLAND INC. POLITICAL ACTION COMMITTEE FOR EMPLOYEES ('PACE')</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 50 E. RIVERCENTER BOULEVARD P. O. BOX 391		Transaction ID: SA12.5689
City COVINGTON State KY Zip Code 41012	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00075994	[MEMO ITEM]	
Name of Employer Occupation	Aggregate Year-to-Date .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Richard S Belas</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 6
Mailing Address 214 11th St NE		Transaction ID: SA12.5697
City Washington State DC Zip Code 20002-6218	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>	[MEMO ITEM]	
Name of Employer Occupation Davis & Harman Attorney	Aggregate Year-to-Date .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 12 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. BRINKER INTERNATIONAL INC POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 6820 LBJ FREEWAY SUITE 200		<b>Transaction ID: SA12.5685</b>
City State Zip Code DALLAS TX 75240	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00241851	<b>[MEMO ITEM]</b>	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B. CGS COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 6
Mailing Address 228 S WASHINGTON STREET SUITE 115		<b>Transaction ID: SA12.5676</b>
City State Zip Code ALEXANDRIA VA 22314	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b> C00416875	transfer of joint fundraising proceeds	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) <b>C. DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 8400 Westpark Drive		<b>Transaction ID: SA12.5687</b>
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00040998	<b>[MEMO ITEM]</b>	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	50.00
<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 13 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. James L Ervin</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2006	
Mailing Address 116 Queen St		Transaction ID: SA12.5694	
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Ervin Technical Associates	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FOOD MARKETING INSTITUTE POLITICAL ACTION COMMITTEE FOODPAC</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 14 / 2006	
Mailing Address 655 Fifteenth Street NW Suite 700		Transaction ID: SA12.5691	
City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C C00014555			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 101 Constitution Ave. NW Suite 800 West		Transaction ID: SA12.5698	
City Washington	State DC	Zip Code 20001	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C C00284885			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

In-kind -  
[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 14 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. MCI INC. EMPLOYEES POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 6	
Mailing Address 1133 19th St. NW		<b>Transaction ID: SA12.5681</b>	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00142836	[MEMO ITEM]		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Robert Moss</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 6	
Mailing Address 10 Forest Falls Dr Unit 5B		<b>Transaction ID: SA12.5695</b>	
City State Zip Code Yarmouth ME 04096	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>	[MEMO ITEM]		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. PINNACLE WEST CAPITAL CORPORATION PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6	
Mailing Address 801 Pennsylvania Ave NW Suite 214		<b>Transaction ID: SA12.5684</b>	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00015933	[MEMO ITEM]		
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 15 / 38
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. REED SMITH POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 1301 K STREET NW SUITE 1100 EAST TOWER		Transaction ID: SA12.5677
City State Zip Code WASHINGTON DC 20005	Amount of Each Receipt this Period 333.33	
FEC ID number of contributing federal political committee. <b>C</b> C00242057	[MEMO ITEM]	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. SECURITIES INDUSTRY ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 1425 K Street NW 7th Floor		Transaction ID: SA12.5693
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00067504	[MEMO ITEM]	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6
Mailing Address 600 13th St. NW Suite 340		Transaction ID: SA12.5683
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00010470	[MEMO ITEM]	
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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:	PAGE 16 / 38
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
White Mountain PAC

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

Date of Receipt

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

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

City State Zip Code  
HOUSTON TX 77060

Transaction ID: SA12.5682

FEC ID number of contributing federal political committee.  
C C00339655

Amount of Each Receipt this Period  
2000.00

Name of Employer

Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	50.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 17 / 38

<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

Full Name (Last, First, Middle Initial) <b>A. 60 Thompson</b>		Transaction ID: SB21B.5642 Date of Disbursement MM / DD / YYYY 08 / 08 / 2006	
Mailing Address 60 Thompson St		Amount of Each Disbursement this Period 512.51	
City New York State NY Zip Code 10012	Purpose of Disbursement Political Travel Candidate Name	Category/Type 002	
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]

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Transaction ID: SB21B.5625 Date of Disbursement MM / DD / YYYY 08 / 02 / 2006	
Mailing Address P.O. Box 1758		Amount of Each Disbursement this Period 39.00	
City Newark State NE Zip Code 07101-1758	Purpose of Disbursement Bank Fee Candidate Name	Category/Type 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		Transaction ID: SB21B.5623 Date of Disbursement MM / DD / YYYY 08 / 08 / 2006	
Mailing Address P.O. Box 1758		Amount of Each Disbursement this Period 91.61	
City Newark State NE Zip Code 07101-1758	Purpose of Disbursement Bank Fee Candidate Name	Category/Type 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) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Transaction ID: SB21B.5631 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>8</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	8		2	0	0	6														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (see Memo)			179.85																				
Candidate Name			001 Category/ Type																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Transaction ID: SB21B.5663 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	2		2	0	0	6														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fee			39.00																				
Candidate Name			001 Category/ Type																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		Transaction ID: SB21B.5668 Date of Disbursement																					
Mailing Address P.O. Box 1758		<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>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	8		2	0	0	6														
City Newark	State NE	Zip Code 07101-1758	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fee			122.04																				
Candidate Name			001 Category/ Type																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	179.85
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 38

<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID:</b> SB21B.5611 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 1758		Amount of Each Disbursement this Period 7205.39
City Newark State NE Zip Code 07101-1758	001 Category/Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID:</b> SB21B.5640 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 1758		Amount of Each Disbursement this Period 2864.27
City Newark State NE Zip Code 07101-1758	001 Category/Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Best Buy Co., Inc.</b>		<b>Transaction ID:</b> SB21B.5661 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 7601 Penn Avenue S		Amount of Each Disbursement this Period 299.99
City Richfield State MN Zip Code 55423	001 Category/Type	
Purpose of Disbursement Office Equipment		
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) ..... ▶	10069.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 38

<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

Full Name (Last, First, Middle Initial) <b>A. Daily Grill</b>		Transaction ID: SB21B.5587 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address 2001 International Dr		Amount of Each Disbursement this Period 72.85	
City McLean State VA Zip Code 22102	Purpose of Disbursement Political Luncheon Candidate Name	003 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Dell Catalog Sales, L.P.</b>		Transaction ID: SB21B.5614 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6	
Mailing Address One Dell Way		Amount of Each Disbursement this Period 198.00	
City Round Rock State TX Zip Code 78682	Purpose of Disbursement Office Equipment 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Dell Catalog Sales, L.P.</b>		Transaction ID: SB21B.5628 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 6	
Mailing Address One Dell Way		Amount of Each Disbursement this Period 5937.00	
City Round Rock State TX Zip Code 78682	Purpose of Disbursement Office Equipment 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) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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

Full Name (Last, First, Middle Initial) <b>A. Dell Catalog Sales, L.P.</b>		Transaction ID: SB21B.5629 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6	
Mailing Address One Dell Way		Amount of Each Disbursement this Period 248.00	
City Round Rock State TX Zip Code 78682	Purpose of Disbursement Office Equipment 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Dell Catalog Sales, L.P.</b>		Transaction ID: SB21B.5620 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6	
Mailing Address One Dell Way		Amount of Each Disbursement this Period 441.00	
City Round Rock State TX Zip Code 78682	Purpose of Disbursement Office Equipment 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. ExxonMobil</b>		Transaction ID: SB21B.5613 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 6	
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 40.05	
City Irving State TX Zip Code 75039	Purpose of Disbursement Travel Expense Candidate Name	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) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. ExxonMobil</b>		Transaction ID: SB21B.5645	
Mailing Address 5959 Las Colinas Blvd		Date of Disbursement MM / DD / YYYY 08 / 17 / 2006	
City Irving	State TX	Zip Code 75039	Amount of Each Disbursement this Period 61.82
Purpose of Disbursement Political Travel	Candidate Name		[MEMO ITEM]
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:	Category/Type 002		

Full Name (Last, First, Middle Initial) <b>B. ExxonMobil</b>		Transaction ID: SB21B.5657	
Mailing Address 5959 Las Colinas Blvd		Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
City Irving	State TX	Zip Code 75039	Amount of Each Disbursement this Period 57.20
Purpose of Disbursement Political Travel	Candidate Name		[MEMO ITEM]
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:	Category/Type 002		

Full Name (Last, First, Middle Initial) <b>C. Gibbs Oil, L.P.</b>		Transaction ID: SB21B.5664	
Mailing Address 90 Everett Avenue		Date of Disbursement MM / DD / YYYY 09 / 04 / 2006	
City Chelsea	State MA	Zip Code 02150	Amount of Each Disbursement this Period 30.51
Purpose of Disbursement Political Travel	Candidate Name		[MEMO ITEM]
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:	Category/Type 002		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 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

Full Name (Last, First, Middle Initial) <b>A. Grolen Communications</b>		Transaction ID: SB21B.5666 Date of Disbursement 09 / 05 / 2006
Mailing Address 814 Elm St		Amount of Each Disbursement this Period 149.95
City Manchester State NH Zip Code 03101	Purpose of Disbursement Office Equipment Candidate Name Category/Type 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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Gulf Oil, L.P.</b>		Transaction ID: SB21B.5654 Date of Disbursement 08 / 28 / 2006
Mailing Address 90 Everett Ave		Amount of Each Disbursement this Period 34.85
City Chelsea State MA Zip Code 02150	Purpose of Disbursement Political Travel Candidate Name Category/Type 002	
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]

Full Name (Last, First, Middle Initial) <b>C. Irving Bluecanoe</b>		Transaction ID: SB21B.5621 Date of Disbursement 08 / 05 / 2006
Mailing Address 73 Lafayette Rd		Amount of Each Disbursement this Period 30.88
City North Hampton State NH Zip Code 03862	Purpose of Disbursement Travel Expense Candidate Name Category/Type 002	
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) ..... ▶	0.00
<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)

PAGE 24 / 38

<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

Full Name (Last, First, Middle Initial) <b>A. Marshall Tech Services</b>		Transaction ID: SB21B.5659 Date of Disbursement 08 / 31 / 2006
Mailing Address 70 Heritage Ave		Amount of Each Disbursement this Period 649.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Office Equipment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Rockys Ace Hardware</b>		Transaction ID: SB21B.5650 Date of Disbursement 08 / 27 / 2006
Mailing Address 40 Island Pond Rd		Amount of Each Disbursement this Period 55.53
City Springfield State MA Zip Code 01118	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Rolling Green Nurseryland</b>		Transaction ID: SB21B.5646 Date of Disbursement 08 / 23 / 2006
Mailing Address 64 Breakfast Hill Rd		Amount of Each Disbursement this Period 177.88
City Greenland State NH Zip Code 03840	Purpose of Disbursement Political Event Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 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

Full Name (Last, First, Middle Initial) <b>A. Shell Oil</b>		Transaction ID: SB21B.5583 Date of Disbursement 06 / 10 / 2006	
Mailing Address PO Box 2463		Amount of Each Disbursement this Period 49.25	
City Houston State TX Zip Code 77252-2463	Purpose of Disbursement Political Travel Candidate Name Category/Type: 002		
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]

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>		Transaction ID: SB21B.5644 Date of Disbursement 08 / 12 / 2006	
Mailing Address PO Box 2463		Amount of Each Disbursement this Period 58.65	
City Houston State TX Zip Code 77252-2463	Purpose of Disbursement Political Travel Candidate Name Category/Type: 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		Transaction ID: SB21B.5649 Date of Disbursement 08 / 27 / 2006	
Mailing Address 76 Ft Eddy Plaza		Amount of Each Disbursement this Period 291.15	
City Concord State NH Zip Code 03301	Purpose of Disbursement Office Supplies Candidate Name Category/Type: 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) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: SB21B.5656 Date of Disbursement 08 / 29 / 2006	
Mailing Address 76 Ft Eddy Plaza		Amount of Each Disbursement this Period 321.86	
City Concord State NH Zip Code 03301	Purpose of Disbursement Office Supplies 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. The Home Depot</b>		Transaction ID: SB21B.5648 Date of Disbursement 08 / 27 / 2006	
Mailing Address 35 Lafayette Rd		Amount of Each Disbursement this Period 154.90	
City North Hampton State NH Zip Code 03862	Purpose of Disbursement Political Event Expense Candidate Name	003 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Tommy Bahama</b>		Transaction ID: SB21B.5586 Date of Disbursement 06 / 22 / 2006	
Mailing Address 2001 International Dr		Amount of Each Disbursement this Period 57.75	
City McLean State VA Zip Code 22102	Purpose of Disbursement Political Gift Candidate Name	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) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 27 / 38

<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

Full Name (Last, First, Middle Initial)  
**A. Vincents on the Pier**

Transaction ID: SB21B.5652

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	8		2	8		2	0	0	6

Mailing Address 10 Howards Wharf

City Newport State RI Zip Code 02840

Amount of Each Disbursement this Period

27.28
-------

Purpose of Disbursement  
Political Luncheon

002
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

0.00
------

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

10249.51
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# 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

Full Name (Last, First, Middle Initial) <b>A. BASS, CHARLES F</b>		<b>Transaction ID: SB23.5669</b> Date of Disbursement 09 / 28 / 2006
Mailing Address PO Box 210		Amount of Each Disbursement this Period 5000.00
City Peterborough	State NH	
Zip Code 03458	Purpose of Disbursement Contribution Candidate Name BASS, CHARLES F Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KYL, JON L</b>		<b>Transaction ID: SB23.5670</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 4442 E CAMELBACK ROAD #160		Amount of Each Disbursement this Period 5000.00
City PHOENIX	State AZ	
Zip Code 85018	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Special Teams 2006 Committee</b>		<b>Transaction ID: SB23.5700</b> Date of Disbursement 09 / 07 / 2006
Mailing Address 425 2nd St NE		Amount of Each Disbursement this Period 25000.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Contribution Candidate Name Category/Type 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>35000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>35000.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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

Full Name (Last, First, Middle Initial) <b>A. Andre Martel for State Senate</b>		<b>Transaction ID: SB29.5571</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6
Mailing Address 237 Riverdale Avenue		Amount of Each Disbursement this Period 900.00
City Manchester State NH Zip Code 03103	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Andre Martel for State Senate		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dragon Mosquito Control, Inc.</b>		<b>Transaction ID: SB29.5567</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 46		Amount of Each Disbursement this Period 180.00
City Stratham State NH Zip Code 03885	003 Category/ Type	
Purpose of Disbursement Political Event Expense		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Exeter Rent-All Inc</b>		<b>Transaction ID: SB29.5574</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 38 Portsmouth Ave		Amount of Each Disbursement this Period 1768.39
City Exeter State NH Zip Code 03833	003 Category/ Type	
Purpose of Disbursement Political Event Expense		
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2848.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. Laena Fallon</b>		<b>Transaction ID: SB29.5605</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 501 Barn Door Gap		Amount of Each Disbursement this Period 2000.00
City Strafford	State NH	
Zip Code 03884		001 Category/ Type
Purpose of Disbursement Consulting Fee		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Laena Fallon</b>		<b>Transaction ID: SB29.5609</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 501 Barn Door Gap		Amount of Each Disbursement this Period 950.00
City Strafford	State NH	
Zip Code 03884		001 Category/ Type
Purpose of Disbursement Consulting Fee		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Flegal Law Office, PA</b>		<b>Transaction ID: SB29.5674</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 159 Main Street		Amount of Each Disbursement this Period 187.57
City Nashua	State NH	
Zip Code 03060		001 Category/ Type
Purpose of Disbursement Administrative Expense		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3137.57
<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 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

Full Name (Last, First, Middle Initial) <b>A. L Cheryl Freed</b>		<b>Transaction ID: SB29.5673</b> Date of Disbursement 09 / 29 / 2006
Mailing Address 159 Main Street		Amount of Each Disbursement this Period 450.00
City Nashua State NH Zip Code 03060	Purpose of Disbursement Administrative Expense 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) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. House Republican Leadership PAC</b>		<b>Transaction ID: SB29.5591</b> Date of Disbursement 08 / 18 / 2006
Mailing Address 69 Portsmouth Avenue		Amount of Each Disbursement this Period 1000.00
City Stratham State NH Zip Code 03885	Purpose of Disbursement Contribution 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) ▼
		Category/Type 011

Full Name (Last, First, Middle Initial) <b>C. Jim Colburn for Governor</b>		<b>Transaction ID: SB29.5589</b> Date of Disbursement 08 / 14 / 2006
Mailing Address P.O. Box 15510		Amount of Each Disbursement this Period 1000.00
City Manchester State NH Zip Code 03105	Purpose of Disbursement Contribution 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) ▼
		Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2450.00
<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)

PAGE 32 / 38

<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

Full Name (Last, First, Middle Initial) <b>A. Tim Lyons</b>		<b>Transaction ID:</b> SB29.5607 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
Mailing Address 12 Main St		Amount of Each Disbursement this Period 2000.00
City Salem State NH Zip Code 03079	Purpose of Disbursement Consulting Fee Candidate Name Category/Type 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) ▼

Full Name (Last, First, Middle Initial) <b>B. Tim Lyons</b>		<b>Transaction ID:</b> SB29.5610 Date of Disbursement MM / DD / YYYY 09 / 08 / 2006
Mailing Address 12 Main St		Amount of Each Disbursement this Period 950.00
City Salem State NH Zip Code 03079	Purpose of Disbursement Consulting Fee Candidate Name Category/Type 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) ▼

Full Name (Last, First, Middle Initial) <b>C. Joel Maiola</b>		<b>Transaction ID:</b> SB29.5604 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
Mailing Address 3 Fernwood Place		Amount of Each Disbursement this Period 10000.00
City Bow State NH Zip Code 03304	Purpose of Disbursement Consulting Fee Candidate Name Category/Type 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12950.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 38

<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

Full Name (Last, First, Middle Initial) <b>A. Joel Maiola</b>		<b>Transaction ID: SB29.5632</b> Date of Disbursement 09 / 22 / 2006
Mailing Address 3 Fernwood Place		Amount of Each Disbursement this Period 47.94
City Bow State NH Zip Code 03304	Purpose of Disbursement Office Supplies Candidate Name Category/Type 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5563</b> Date of Disbursement 07 / 16 / 2006
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	Purpose of Disbursement Consulting Fee Candidate Name Category/Type 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5569</b> Date of Disbursement 07 / 24 / 2006
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 4000.00
City Washington State DC Zip Code 20006	Purpose of Disbursement Political Event Expense Candidate Name Category/Type 003	
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) ..... ▶	9047.94
<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)

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

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NAME OF COMMITTEE (In Full)  
White Mountain PAC

Full Name (Last, First, Middle Initial) <b>A. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5576</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5577</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5578</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	001 Category/ Type	
Purpose of Disbursement Consulting Fee		
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<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 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

Full Name (Last, First, Middle Initial) <b>A. Pearson &amp; Associates</b>		Transaction ID: SB29.5593 Date of Disbursement																				
Mailing Address 900 19th Street, NW 8th Floor		<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>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	8		2	0	0	6													
City Washington	State DC	Zip Code 20006																				
Purpose of Disbursement Political Event Expense		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																			
2000.00																						
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:	Category/Type <table border="1"><tr><td>003</td></tr></table>		003																			
003																						

Full Name (Last, First, Middle Initial) <b>B. Pearson &amp; Associates</b>		Transaction ID: SB29.5595 Date of Disbursement																				
Mailing Address 900 19th Street, NW 8th Floor		<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>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	8		2	0	0	6													
City Washington	State DC	Zip Code 20006																				
Purpose of Disbursement Administrative Expense		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>123.96</td></tr></table>	123.96																			
123.96																						
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:	Category/Type <table border="1"><tr><td>001</td></tr></table>		001																			
001																						

Full Name (Last, First, Middle Initial) <b>C. Pearson &amp; Associates</b>		Transaction ID: SB29.5634 Date of Disbursement																				
Mailing Address 900 19th Street, NW 8th Floor		<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>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	6													
City Washington	State DC	Zip Code 20006																				
Purpose of Disbursement Political Event Expense		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>300.00</td></tr></table>	300.00																			
300.00																						
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:	Category/Type <table border="1"><tr><td>003</td></tr></table>		003																			
003																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2423.96</td></tr></table>	2423.96
2423.96		
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5635</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006		
Purpose of Disbursement Consulting Fee Candidate Name		001 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:		

Full Name (Last, First, Middle Initial) <b>B. Pearson &amp; Associates</b>		<b>Transaction ID: SB29.5638</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 900 19th Street, NW 8th Floor		Amount of Each Disbursement this Period 24.07
City Washington State DC Zip Code 20006		
Purpose of Disbursement Administrative Expense Candidate Name		001 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:		

Full Name (Last, First, Middle Initial) <b>C. Rachel Pearson</b>		<b>Transaction ID: SB29.5636</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address Pearson & Associates 900 19th Street, NW		Amount of Each Disbursement this Period 1908.50
City Washington State DC Zip Code 20006		
Purpose of Disbursement Political Event Expense Candidate Name		001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6932.57
<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 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

Full Name (Last, First, Middle Initial) <b>A. Rachel Pearson</b>		Transaction ID: SB29.5672 Date of Disbursement 09 / 29 / 2006
Mailing Address Pearson & Associates 900 19th Street, NW		Amount of Each Disbursement this Period 1418.10
City Washington	State DC	
Zip Code 20006		003 Category/ Type
Purpose of Disbursement Political Event Expense		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Royal Heritage Properties, LLC</b>		Transaction ID: SB29.5572 Date of Disbursement 07 / 27 / 2006
Mailing Address 11 Northeastern Blvd Suite 140		Amount of Each Disbursement this Period 800.00
City Nashua	State NH	
Zip Code 03062		001 Category/ Type
Purpose of Disbursement Rent		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Senate Republican Victory PAC</b>		Transaction ID: SB29.5596 Date of Disbursement 08 / 24 / 2006
Mailing Address 582 Chestnut St		Amount of Each Disbursement this Period 2000.00
City Manchester	State NH	
Zip Code 03104		011 Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4218.10
<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 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

Full Name (Last, First, Middle Initial) <b>A. Summerwind</b>		Transaction ID: SB29.5564 Date of Disbursement 07 / 16 / 2006	
Mailing Address 43 Hampton Falls Road		Amount of Each Disbursement this Period 450.00	
City Exeter State NH Zip Code 03833	Purpose of Disbursement Political Event Expense Candidate Name	003 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Transaction ID: SB29.5598 Date of Disbursement 08 / 25 / 2006	
Mailing Address PO Box 1		Amount of Each Disbursement this Period 600.00	
City Worcester State MA Zip Code 01654-0001	Purpose of Disbursement Telephone Service 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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>60058.53</b>