

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 11 07 2006 in the State of _____

5. Covering Period 10 19 2006 through 11 27 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 | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
White Mountain PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 9 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 7 |

| | | | |
|---|---|---|---|
| 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 | 144393.51 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 40651.49 | 229201.49 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 185045.00 | 447306.79 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 88101.28 | 350363.07 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 96943.72 | 96943.72 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
White Mountain PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 9 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 7 |

| | | | |
|---|---|---|---|
| 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 | 16000.00 | 60000.00 |
| (i) Itemized (use Schedule A) | 300.00 | 415.00 |
| (ii) Unitemized | 16300.00 | 60415.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 22500.00 | 166885.00 |
| (c) Other Political Committees (such as PACs) | 38800.00 | 227300.00 |
| (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 | 0.00 | 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) | 1851.49 | 1851.49 |
| 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)) | 40651.49 | 229201.49 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 40651.49 | 229201.49 |

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..... | 10369.10 | 24710.51 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 10369.10 | 24710.51 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 30000.00 | 131100.00 |
| 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..... | 47732.18 | 194552.56 |
| 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)).. | 88101.28 | 350363.07 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 88101.28 | 350363.07 |

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 | 38800.00 | 227300.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 38800.00 | 227300.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 10369.10 | 24710.51 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 1851.49 | 1851.49 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 8517.61 | 22859.02 |

**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 / 42 |
| | <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 | |

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) A. Andrew Athy, Jr. | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address 1310 Nineteenth St., NW | | Transaction ID: SA11A1.5750 | |
| City State Zip Code Washington DC 20036 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | Contribution | | |
| Name of Employer O'Neill, Athy & Casey | Occupation Consultant | | |
| 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. Steven K Berry | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 | |
| Mailing Address 3604 Annandale Rd | | Transaction ID: SA11A1.5786 | |
| City State Zip Code Annandale VA 22003 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | Contribution | | |
| Name of Employer | Occupation | | |
| 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) C. A Bradford Card | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 | |
| Mailing Address 896 Helga Place | | Transaction ID: SA11A1.5784 | |
| City State Zip Code McLean VA 22102 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | Contribution | | |
| Name of Employer Dutko Worldwide | Occupation Managing Principal | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2000.00 |
| TOTAL 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 7 / 42 |
| | <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) A. Michael B Fox | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 | |
| Mailing Address 369 Border Rd | | Transaction ID: SA11A1.5741 | |
| City Concord | State MA | Zip Code 01742 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer FMR Corp | Occupation Executive Vice President | | |
| 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. Edward O Fritts | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 | |
| Mailing Address 4441 33rd St N | | Transaction ID: SA11A1.5788 | |
| City Arlington | State VA | Zip Code 22207 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | 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) C. Abigail P Johnson | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 | |
| Mailing Address 82 Devonshire St | | Transaction ID: SA11A1.5769 | |
| City Boston | State MA | Zip Code 02109 | Amount of Each Receipt this Period 2000.00 |
| FEC ID number of contributing federal political committee. C | | Contribution | |
| Name of Employer Fidelity Investments | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3500.00 |
| TOTAL 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 8 / 42 |
| | <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 | |

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

| | | |
|---|--|--|
| A. Full Name (Last, First, Middle Initial) Edward C Johnson, III Mailing Address 82 Devonshire St F9A City Boston State MA Zip Code 02109 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5743 Amount of Each Receipt this Period 2000.00 Contribution |
| Name of Employer Fidelity Investments Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00 | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Patric Griffin Link Mailing Address 6118 Franklin Park Rd. City McLean State VA Zip Code 22101 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6 Transaction ID: SA11A1.5781 Amount of Each Receipt this Period 500.00 Contribution |
| Name of Employer Wexler & Walker Public Policy Occupation Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 | | |

| | | |
|--|--|--|
| C. Full Name (Last, First, Middle Initial) John J Lively Mailing Address 5316 Baltimore Ave City Chevy Chase State MD Zip Code 20815-3739 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5749 Amount of Each Receipt this Period 1000.00 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 | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 42 |
| | <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) A. Arthur D. Mason | | Date of Receipt MM / DD / YYYY 11 / 03 / 2006 |
| Mailing Address 3302 Rolling Road | | Transaction ID: SA11A1.5762 |
| City State Zip Code Chevy Chase MD 20815 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Contribution |
| Aggregate Year-to-Date ▼ 2000.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Patrick Joseph Pettey | | Date of Receipt MM / DD / YYYY 10 / 31 / 2006 |
| Mailing Address 10301 Chapel Road | | Transaction ID: SA11A1.5740 |
| City State Zip Code Potomac MD 20854 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1500.00 |
| Name of Employer Occupation Williams and Jensen Consultant | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Contribution |
| Aggregate Year-to-Date ▼ 1500.00 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Kathleen M Ramsey | | Date of Receipt MM / DD / YYYY 11 / 27 / 2006 |
| Mailing Address 4011 Lorcom Lane | | Transaction ID: SA11A1.5789 |
| City State Zip Code Arlington VA 22207 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 |
| Name of Employer Occupation The Fritts Group | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Contribution |
| Aggregate Year-to-Date ▼ 1500.00 | | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 4000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 42 |
| | <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

| | | |
|---|------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) Hollings C Renton | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 2100 Powell St FI 12 | | Transaction ID: SA11A1.5756 |
| City Emeryville | State CA | Zip Code 94608-1803 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer | Occupation | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|-------------------------------------|---|
| B. Full Name (Last, First, Middle Initial) Robert L Reynolds | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 153 Garfield Rd | | Transaction ID: SA11A1.5751 |
| City Concord | State MA | Zip Code 01742 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Fidelity Investments | Occupation Money Management | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | |

| | | |
|---|------------------------------------|---|
| C. Full Name (Last, First, Middle Initial) John Gerard Ryan | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 1432 Highwood Dr | | Transaction ID: SA11A1.5785 |
| City McLean | State VA | Zip Code 22101-2520 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Bristol-Myers Squibb | Occupation General Counsel | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) ▶ | 16000.00 |

**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 / 42 | | |
| | <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 |

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) A. BIOGEN IDEC POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address 14 Cambridge Center | | Transaction ID: SA11C.5746 | |
| City State Zip Code Cambridge MA 02142 | Amount of Each Receipt this Period 2500.00 | | |
| FEC ID number of contributing federal political committee. C C00390351 | | Contribution | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 2500.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. COMCAST CORP. POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address 1500 Market Street 35th Floor | | Transaction ID: SA11C.5765 | |
| City State Zip Code Philadelphia PA 19102 | Amount of Each Receipt this Period 2000.00 | | |
| FEC ID number of contributing federal political committee. C C00248716 | | Contribution | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 4000.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. DIRECTV GROUP INC. FUND - FEDERAL (DIRECTV PAC) | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 | |
| Mailing Address 444 North Capitol Street NW Suite 728 | | Transaction ID: SA11C.5791 | |
| City State Zip Code Washington DC 20001 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C00331991 | | Contribution | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 2000.00 | | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5500.00 |
| TOTAL 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 12 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. FARMERS GROUP INC POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6 |
| Mailing Address 591 REDWOOD HIGHWAY BUILDING 4000 | | Transaction ID: SA11C.5778 |
| City State Zip Code MILL VALLEY CA 94941 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00135681 | 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. GENENTECH INC POLITICAL ACTION COMMITTEE (GENENPAC) | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6 |
| Mailing Address 460 POINT SAN BRUNO BLVD | | Transaction ID: SA11C.5776 |
| City State Zip Code SO SAN FRANCISCO CA 94080 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C C00199257 | 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 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. GILEAD SCIENCES INC HEALTHCARE POLICY PAC | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6 |
| Mailing Address 333 LAKESIDE DRIVE | | Transaction ID: SA11C.5774 |
| City State Zip Code FOSTER CITY CA 94404 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00396895 | 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 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 9000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 42 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC) | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 1401 H STREET NW SUITE 1200 | | Transaction ID: SA11C.5754 |
| City WASHINGTON State DC Zip Code 20005 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00105981 | 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. JACK PAC | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address P.O. BOX 14 PO Box 14 | | Transaction ID: SA11C.5768 |
| City BUFFALO State NY Zip Code 14205 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00271171 | 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) C. NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 2525 Harrodsburg Road | | Transaction ID: SA11C.5766 |
| City LEXINGTON State KY Zip Code 40504 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00360008 | 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 | | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 4000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 14 / 42 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
White Mountain PAC

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300 | | Transaction ID: SA11C.5764 |
| City State Zip Code HOUSTON TX 77060 | Amount of Each Receipt this Period 3000.00 | |
| FEC ID number of contributing federal political committee. C C00339655 | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 3000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. WYETH GOOD GOVERNMENT FUND | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address FIVE GIRALDA FARMS | | Transaction ID: SA11C.5738 |
| City State Zip Code MADISON NJ 07940 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00115303 | Contribution | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 1000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4000.00 |
| TOTAL This Period (last page this line number only) ▶ | 22500.00 |

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

| | | |
|--|------------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 15 / 42 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <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) A. Pearson & Associates | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Transaction ID: SA15.5772 |
| City Washington State DC Zip Code 20006 | Amount of Each Receipt this Period 378.00 | |
| Name of Employer Occupation | | Fundraising Reimbursement |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 378.00 |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Pearson & Associates | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Transaction ID: SA15.5782 |
| City Washington State DC Zip Code 20006 | Amount of Each Receipt this Period 66.15 | |
| Name of Employer Occupation | | Fundraising Reimbursement |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 444.15 |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Royal Heritage Properties, LLC | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 11 Northeastern Blvd Suite 140 | | Transaction ID: SA15.5783 |
| City Nashua State NH Zip Code 03062 | Amount of Each Receipt this Period 1407.34 | |
| Name of Employer Occupation | | Refund unused rent and security deposit |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 1407.34 |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1851.49 |
| TOTAL This Period (last page this line number only) ▶ | 1851.49 |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Airport Country Store & Deli | | Transaction ID: SB21B.5868 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6 |
| Mailing Address 63 Gilford East Dr | | Amount of Each Disbursement this Period 28.27 |
| City State Zip Code Gilford NH 03249 | Purpose of Disbursement Political Luncheon 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] |
| Category/Type 001 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Bank of America | | Transaction ID: SB21B.5834 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6 |
| Mailing Address P.O. Box 1758 | | Amount of Each Disbursement this Period 1361.83 |
| City State Zip Code Newark NE 07101-1758 | 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) ▼ | [MEMO ITEM] |
| Category/Type 001 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Bank of America | | Transaction ID: SB21B.5854 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6 |
| Mailing Address P.O. Box 1758 | | Amount of Each Disbursement this Period 9007.27 |
| City State Zip Code Newark NE 07101-1758 | 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) ▼ | [MEMO ITEM] |
| Category/Type 001 | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 10369.10 |
| TOTAL 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 17 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Boston Coach | | Transaction ID: SB21B.5887 Date of Disbursement 10 / 30 / 2006 |
| Mailing Address | | Amount of Each Disbursement this Period 321.75 |
| City Boston | State MA | |
| Purpose of Disbursement Political Travel | Category/ Type 002 | [MEMO ITEM] |
| 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. Boston Coach | | Transaction ID: SB21B.5893 Date of Disbursement 11 / 02 / 2006 |
| Mailing Address | | Amount of Each Disbursement this Period 114.25 |
| City Boston | State MA | |
| Purpose of Disbursement Political Travel | Category/ Type 002 | [MEMO ITEM] |
| 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) C. Camper's Inn | | Transaction ID: SB21B.5881 Date of Disbursement 10 / 25 / 2006 |
| Mailing Address 35 Technology Park | | Amount of Each Disbursement this Period 2686.40 |
| City Merrimack | State NH | |
| Purpose of Disbursement Political Travel | Category/ Type 003 | [MEMO ITEM] |
| 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) ▼ | |

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Caren's Caravan Service | | Transaction ID: SB21B.5859 Date of Disbursement 10 / 12 / 2006 |
| Mailing Address PO Box 832 | | Amount of Each Disbursement this Period 235.00 |
| City Exeter State NH Zip Code 03833 | 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. Churchills Garden Center | | Transaction ID: SB21B.5860 Date of Disbursement 10 / 13 / 2006 |
| Mailing Address 12 Hampton Rd | | Amount of Each Disbursement this Period 203.96 |
| City Exeter State NH Zip Code 03833 | Purpose of Disbursement Fundraising 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) ▼ | [MEMO ITEM] |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Common Man Concord | | Transaction ID: SB21B.5895 Date of Disbursement 11 / 02 / 2006 |
| Mailing Address | | Amount of Each Disbursement this Period 52.94 |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Political Luncheon 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) ▼ | [MEMO ITEM] |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Copy Express | | Transaction ID: SB21B.5862 Date of Disbursement 10 / 16 / 2006 |
| Mailing Address 931 Elm St | | Amount of Each Disbursement this Period 123.96 |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Administrative 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) ▼ | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. CR Sparks Restaurant | | Transaction ID: SB21B.5855 Date of Disbursement 10 / 10 / 2006 |
| Mailing Address 18 Kilton Rd | | Amount of Each Disbursement this Period 47.04 |
| City Bedford State NH Zip Code 03110 | Purpose of Disbursement Political Luncheon 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) C. CR Sparks Restaurant | | Transaction ID: SB21B.5874 Date of Disbursement 10 / 20 / 2006 |
| Mailing Address 18 Kilton Rd | | Amount of Each Disbursement this Period 104.45 |
| City Bedford State NH Zip Code 03110 | Purpose of Disbursement Political Luncheon 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) ▼ | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 20 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. CVS Pharmacy | | Transaction ID: SB21B.5847 Date of Disbursement 09 / 22 / 2006 | |
| Mailing Address One CVS Drive | | Amount of Each Disbursement this Period 30.56 | |
| City Woonsocket State RI Zip Code 02895 | Purpose of Disbursement Political Travel Reimbursement 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. ExxonMobil | | Transaction ID: SB21B.5857 Date of Disbursement 10 / 10 / 2006 | |
| Mailing Address 5959 Las Colinas Blvd | | Amount of Each Disbursement this Period 31.75 | |
| City Irving State TX Zip Code 75039 | Purpose of Disbursement Political Travel 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) C. ExxonMobil | | Transaction ID: SB21B.5873 Date of Disbursement 10 / 20 / 2006 | |
| Mailing Address 5959 Las Colinas Blvd | | Amount of Each Disbursement this Period 78.98 | |
| City Irving State TX Zip Code 75039 | Purpose of Disbursement Political Travel 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Golf & Ski Warehouse | | Transaction ID: SB21B.5866 Date of Disbursement 10 / 17 / 2006 | |
| Mailing Address 1680 Greenland Rd | | Amount of Each Disbursement this Period 1899.89 | |
| City Greenland State NH Zip Code 03840 | Purpose of Disbursement Fundraising 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. Grolen Communications | | Transaction ID: SB21B.5851 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 814 Elm St | | Amount of Each Disbursement this Period 99.95 | |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Computer Expense 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) C. Grolen Communications | | Transaction ID: SB21B.5892 Date of Disbursement 11 / 01 / 2006 | |
| Mailing Address 814 Elm St | | Amount of Each Disbursement this Period 99.95 | |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Computer Expense 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Gulf Oil, L.P. | | Transaction ID: SB21B.5849 Date of Disbursement 09 / 24 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 16.16 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel | 002 Category/ Type | |
| Candidate Name | [MEMO ITEM] | | |
| 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. Gulf Oil, L.P. | | Transaction ID: SB21B.5852 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 24.91 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel | 002 Category/ Type | |
| Candidate Name | [MEMO ITEM] | | |
| 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) C. Gulf Oil, L.P. | | Transaction ID: SB21B.5861 Date of Disbursement 10 / 13 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 34.33 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel | 002 Category/ Type | |
| Candidate Name | [MEMO ITEM] | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Gulf Oil, L.P. | | Transaction ID: SB21B.5864 Date of Disbursement 10 / 16 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 31.84 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. Gulf Oil, L.P. | | Transaction ID: SB21B.5875 Date of Disbursement 10 / 21 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 53.15 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) C. Gulf Oil, L.P. | | Transaction ID: SB21B.5886 Date of Disbursement 10 / 28 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 22.31 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | [] |

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

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Gulf Oil, L.P. | | Transaction ID: SB21B.5894 Date of Disbursement 11 / 02 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 22.01 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. Gulf Oil, L.P. | | Transaction ID: SB21B.5897 Date of Disbursement 11 / 04 / 2006 | |
| Mailing Address 90 Everett Ave | | Amount of Each Disbursement this Period 19.94 | |
| City Chelsea State MA Zip Code 02150 | Purpose of Disbursement Political Travel 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) C. Huntington Hotel | | Transaction ID: SB21B.5884 Date of Disbursement 10 / 27 / 2006 | |
| Mailing Address 1075 California St | | Amount of Each Disbursement this Period 1669.30 | |
| City San Francisco State CA Zip Code 94108 | Purpose of Disbursement Political Travel 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 25 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Irving Bluecanoe | | Transaction ID: SB21B.5891 Date of Disbursement 10 / 30 / 2006 | |
| Mailing Address 73 Lafayette Rd | | Amount of Each Disbursement this Period 21.30 | |
| City North Hampton State NH Zip Code 03862 | Purpose of Disbursement Political Travel 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]

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. JW Hills Sports Bar & Grill | | Transaction ID: SB21B.5842 Date of Disbursement 09 / 15 / 2006 | |
| Mailing Address 795 Elm St | | Amount of Each Disbursement this Period 57.49 | |
| City Manchester State NH Zip Code 03109 | Purpose of Disbursement Political Luncheon 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) C. Mainely New Hampshire | | Transaction ID: SB21B.5871 Date of Disbursement 10 / 19 / 2006 | |
| Mailing Address 33 Deer Street Suite A | | Amount of Each Disbursement this Period 130.75 | |
| City Portsmouth State NH Zip Code 03801 | Purpose of Disbursement Political Gift 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Pasta Loft Restaurant | | Transaction ID: SB21B.5889 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6 |
| Mailing Address 241 Union Square | | Amount of Each Disbursement this Period 56.26 |
| City Milford State NH Zip Code 03055 | [MEMO ITEM] | |
| 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Piccola Italian Restaurant | | Transaction ID: SB21B.5838 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 |
| Mailing Address 815 Elm St | | Amount of Each Disbursement this Period 56.95 |
| City Manchester State NH Zip Code 03101 | [MEMO ITEM] | |
| Purpose of Disbursement Political Luncheon 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. PR Restaurants LLC | | Transaction ID: SB21B.5898 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6 |
| Mailing Address | | Amount of Each Disbursement this Period 60.57 |
| City Manchester State NH Zip Code | [MEMO ITEM] | |
| 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) ▼ | |

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Rockys Ace Hardware | | Transaction ID: SB21B.5837 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2006 |
| Mailing Address 40 Island Pond Rd | | Amount of Each Disbursement this Period 27.99 |
| City Springfield State MA Zip Code 01118 | [MEMO ITEM] | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Rose Cafe | | Transaction ID: SB21B.5878 Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2006 |
| Mailing Address 2298 Union | | Amount of Each Disbursement this Period 266.92 |
| City San Francisco State CA Zip Code 94123 | [MEMO ITEM] | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Senate Gift Shop | | Transaction ID: SB21B.5870 Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2006 |
| Mailing Address Russell Senate Office Building | | Amount of Each Disbursement this Period 258.00 |
| City Washington State DC Zip Code 20510 | [MEMO ITEM] | |
| Purpose of Disbursement Political Gift 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) ▼ | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 28 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Sheraton Hotels Crystal City | | Transaction ID: SB21B.5845 Date of Disbursement 09 / 21 / 2006 |
| Mailing Address 1800 Jefferson Davis Highway | | Amount of Each Disbursement this Period 307.60 |
| City Arlington State VA Zip Code 22202 | Purpose of Disbursement Political Travel 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. Southwest Airline | | Transaction ID: SB21B.5876 Date of Disbursement 10 / 23 / 2006 |
| Mailing Address P.O. Box 36647 - 1CR | | Amount of Each Disbursement this Period 57.80 |
| City Dallas State TX Zip Code 75235-1647 | Purpose of Disbursement Political Travel 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) C. Staples | | Transaction ID: SB21B.5835 Date of Disbursement 09 / 07 / 2006 |
| Mailing Address 76 Ft Eddy Plaza | | Amount of Each Disbursement this Period 96.92 |
| City Concord State NH Zip Code 03301 | 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) ▼ | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER: (check only one)

PAGE 29 / 42

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Transaction ID: SB21B.5836 Date of Disbursement 09 / 09 / 2006 | |
| Mailing Address 76 Ft Eddy Plaza | | Amount of Each Disbursement this Period 101.25 | |
| 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. Staples | | Transaction ID: SB21B.5850 Date of Disbursement 09 / 27 / 2006 | |
| Mailing Address 76 Ft Eddy Plaza | | Amount of Each Disbursement this Period 49.96 | |
| 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) C. Staples | | Transaction ID: SB21B.5853 Date of Disbursement 10 / 06 / 2006 | |
| Mailing Address 76 Ft Eddy Plaza | | Amount of Each Disbursement this Period 214.09 | |
| 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Transaction ID: SB21B.5865 Date of Disbursement 10 / 17 / 2006 | |
| Mailing Address 76 Ft Eddy Plaza | | Amount of Each Disbursement this Period 57.68 | |
| 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. Staples | | Transaction ID: SB21B.5883 Date of Disbursement 10 / 25 / 2006 | |
| Mailing Address 76 Ft Eddy Plaza | | Amount of Each Disbursement this Period 48.52 | |
| 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) C. The Home Depot | | Transaction ID: SB21B.5880 Date of Disbursement 10 / 24 / 2006 | |
| Mailing Address 35 Lafayette Rd | | Amount of Each Disbursement this Period 51.00 | |
| City North Hampton State NH Zip Code 03862 | 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]

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
White Mountain PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Three Chimneys Inn, LLC | | Transaction ID: SB21B.5840 Date of Disbursement MM / DD / YYYY 09 / 14 / 2006 |
| Mailing Address 17 Newmarket Rd | | Amount of Each Disbursement this Period 200.00 |
| City Durham State NH Zip Code 03824 | [MEMO ITEM] | |
| Purpose of Disbursement Political Dinner 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. USPS | | Transaction ID: SB21B.5844 Date of Disbursement MM / DD / YYYY 09 / 18 / 2006 |
| Mailing Address Bridge St | | Amount of Each Disbursement this Period 78.00 |
| City Concord State NH Zip Code 03301 | [MEMO ITEM] | |
| Purpose of Disbursement Postage 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. USPS | | Transaction ID: SB21B.5858 Date of Disbursement MM / DD / YYYY 10 / 12 / 2006 |
| Mailing Address Bridge St | | Amount of Each Disbursement this Period 117.00 |
| City Concord State NH Zip Code 03301 | [MEMO ITEM] | |
| Purpose of Disbursement Postage 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) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | 10369.10 |

**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 |

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) A. BOB CORKER FOR SENATE | | Transaction ID: SB23.5794 Date of Disbursement 10 / 26 / 2006 |
| Mailing Address 518 GEORGIA AVE 2ND FLOOR | | Amount of Each Disbursement this Period 5000.00 |
| City CHATANOOGA State TN Zip Code 37403 | 011 Category/Type | |
| Purpose of Disbursement Contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00 | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. BOB CORKER FOR SENATE | | Transaction ID: SB23.5797 Date of Disbursement 10 / 26 / 2006 |
| Mailing Address 518 GEORGIA AVE 2ND FLOOR | | Amount of Each Disbursement this Period 5000.00 |
| City CHATANOOGA State TN Zip Code 37403 | 011 Category/Type | |
| Purpose of Disbursement Contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. BOUCHARD FOR US SENATE | | Transaction ID: SB23.5800 Date of Disbursement 10 / 30 / 2006 |
| Mailing Address 280 WEST MAPLE SUITE 202 | | Amount of Each Disbursement this Period 5000.00 |
| City BIRMINGHAM State MI Zip Code 48009 | 011 Category/Type | |
| Purpose of Disbursement Contribution Candidate Name BOUCHARD FOR US SENATE | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00 | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 15000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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) A. BOUCHARD FOR US SENATE | | Transaction ID: SB23.5802 Date of Disbursement 10 / 30 / 2006 |
| Mailing Address 280 WEST MAPLE SUITE 202 | | Amount of Each Disbursement this Period 5000.00 |
| City BIRMINGHAM State MI Zip Code 48009 | 011 Category/Type | |
| Purpose of Disbursement Contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Conrad Burns | | Transaction ID: SB23.5793 Date of Disbursement 10 / 26 / 2006 |
| Mailing Address P.O. Box 41664 | | Amount of Each Disbursement this Period 5000.00 |
| City Arlington State VA Zip Code 22204 | 011 Category/Type | |
| Purpose of Disbursement Contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Steele for Maryland, Inc. | | Transaction ID: SB23.5798 Date of Disbursement 10 / 30 / 2006 |
| Mailing Address 1350 Dorsey Road Building A, Suite A | | Amount of Each Disbursement this Period 5000.00 |
| City Hanover State MD Zip Code 21076 | 011 Category/Type | |
| Purpose of Disbursement Contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 15000.00 |
| TOTAL This Period (last page this line number only) ▶ | 30000.00 |

**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 34 / 42

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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) A. Kevin Bargo | | Transaction ID: SB29.5815 Date of Disbursement 10 / 31 / 2006 |
| Mailing Address 1527 D St, NE | | Amount of Each Disbursement this Period 1410.00 |
| City Washington | State DC | |
| Zip Code 20002 | Purpose of Disbursement Travel Reimbursement | |
| Candidate Name | Category/Type 001 | |
| 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. Kevin Bargo | | Transaction ID: SB29.5820 Date of Disbursement 11 / 17 / 2006 |
| Mailing Address 1527 D St, NE | | Amount of Each Disbursement this Period 505.00 |
| City Washington | State DC | |
| Zip Code 20002 | Purpose of Disbursement Travel Reimbursement | |
| Candidate Name | Category/Type 001 | |
| 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) C. Exeter Rent-All Inc | | Transaction ID: SB29.5823 Date of Disbursement 11 / 17 / 2006 |
| Mailing Address 38 Portsmouth Ave | | Amount of Each Disbursement this Period 2290.89 |
| City Exeter | State NH | |
| Zip Code 03833 | 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 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4205.89 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 35 / 42

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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) A. Laena Fallon | | Transaction ID: SB29.5814 Date of Disbursement 11 / 01 / 2006 | |
| Mailing Address 501 Barn Door Gap | | Amount of Each Disbursement this Period 2950.00 | |
| City Strafford | State NH | Zip Code 03884 | Amount of Each Disbursement this Period 2950.00 |
| Purpose of Disbursement Administrative Expense | | Category/ Type 001 | |
| 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. Laena Fallon | | Transaction ID: SB29.5826 Date of Disbursement 11 / 20 / 2006 | |
| Mailing Address 501 Barn Door Gap | | Amount of Each Disbursement this Period 2873.19 | |
| City Strafford | State NH | Zip Code 03884 | Amount of Each Disbursement this Period 2873.19 |
| Purpose of Disbursement Political Travel Reimbursement | | Category/ Type 002 | |
| 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) C. Tim Lyons | | Transaction ID: SB29.5813 Date of Disbursement 11 / 01 / 2006 | |
| Mailing Address 12 Main St | | Amount of Each Disbursement this Period 2950.00 | |
| City Salem | State NH | Zip Code 03079 | Amount of Each Disbursement this Period 2950.00 |
| Purpose of Disbursement Administrative Expense | | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8773.19 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 42

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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) A. Tim Lyons | | Transaction ID: SB29.5821 Date of Disbursement 11 / 17 / 2006 | |
| Mailing Address 12 Main St | | Amount of Each Disbursement this Period 1467.16 | |
| City Salem State NH Zip Code 03079 | Purpose of Disbursement Political Travel Reimbursement 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) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Joel Maiola | | Transaction ID: SB29.5809 Date of Disbursement 10 / 23 / 2006 | |
| Mailing Address 3 Fernwood Place | | Amount of Each Disbursement this Period 183.00 | |
| City Bow State NH Zip Code 03304 | Purpose of Disbursement Fundraising 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) C. Joel Maiola | | Transaction ID: SB29.5812 Date of Disbursement 11 / 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 Administrative Expense 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) ▼ | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 11650.16 |
| TOTAL 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 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 |

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) A. Joel Maiola | | Transaction ID: SB29.5818 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 3 Fernwood Place | | Amount of Each Disbursement this Period 119.51 |
| City Bow State NH Zip Code 03304 | Purpose of Disbursement Fundraising Reimbursement Candidate Name Category/Type 001 | |
| 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. Joel Maiola | | Transaction ID: SB29.5827 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 3 Fernwood Place | | Amount of Each Disbursement this Period 1964.18 |
| City Bow State NH Zip Code 03304 | Purpose of Disbursement Administrative Expense Candidate Name Category/Type 001 | |
| 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) C. Pearson & Associates | | Transaction ID: SB29.5806 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 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 Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 7083.69 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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) A. Pearson & Associates | | Transaction ID: SB29.5807 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>1</td><td>0</td><td></td><td>1</td><td>9</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 | 1 | 0 | | 1 | 9 | | 2 | 0 | 0 | 6 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 1 | 0 | | 1 | 9 | | 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>24.07</td></tr></table> | 24.07 | | | | | | | | | | | | | | | | | | | |
| 24.07 | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Category/ Type <table border="1"><tr><td>003</td></tr></table> | 003 | | | | | | | | | | | | | | | | | | | |
| 003 | | | | | | | | | | | | | | | | | | | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | | |
| State: | District: | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|---|-----------|--|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) B. Pearson & Associates | | Transaction ID: SB29.5808 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>1</td><td>0</td><td></td><td>1</td><td>9</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 | 1 | 0 | | 1 | 9 | | 2 | 0 | 0 | 6 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 1 | 0 | | 1 | 9 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20006 | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fundraising Expense | | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <table border="1"><tr><td>215.00</td></tr></table> | 215.00 | | | | | | | | | | | | | | | | | | | |
| 215.00 | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Category/ Type <table border="1"><tr><td>001</td></tr></table> | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | | |
| State: | District: | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|---|-----------|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) C. Pearson & Associates | | Transaction ID: SB29.5810 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>1</td><td>0</td><td></td><td>2</td><td>5</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 | 1 | 0 | | 2 | 5 | | 2 | 0 | 0 | 6 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 1 | 0 | | 2 | 5 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20006 | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fundraising Expense | | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <table border="1"><tr><td>1015.00</td></tr></table> | 1015.00 | | | | | | | | | | | | | | | | | | | |
| 1015.00 | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Category/ Type <table border="1"><tr><td>003</td></tr></table> | 003 | | | | | | | | | | | | | | | | | | | |
| 003 | | | | | | | | | | | | | | | | | | | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | | |
| State: | District: | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | <table border="1"><tr><td>1254.07</td></tr></table> | 1254.07 |
| 1254.07 | | |
| TOTAL This Period (last page this line number only) | <table border="1"><tr><td></td></tr></table> | |
| | | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 39 / 42

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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) A. Pearson & Associates | | Transaction ID: SB29.5811 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Amount of Each Disbursement this Period 4700.00 |
| City Washington State DC Zip Code 20006 | | |
| Purpose of Disbursement Fundraising 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. Pearson & Associates | | Transaction ID: SB29.5819 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Amount of Each Disbursement this Period 636.90 |
| City Washington State DC Zip Code 20006 | | |
| Purpose of Disbursement Fundraising 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) C. Pearson & Associates | | Transaction ID: SB29.5829 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Amount of Each Disbursement this Period 60.00 |
| City Washington State DC Zip Code 20006 | | |
| Purpose of Disbursement Fundraising 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) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5396.90 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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) A. Pearson & Associates | | Transaction ID: SB29.5830 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 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. Pearson & Associates | | Transaction ID: SB29.5831 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Amount of Each Disbursement this Period 150.00 |
| City Washington State DC Zip Code 20006 | | |
| Purpose of Disbursement Fundraising 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) C. Pearson & Associates | | Transaction ID: SB29.5832 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6 |
| Mailing Address 900 19th Street, NW 8th Floor | | Amount of Each Disbursement this Period 27.13 |
| City Washington State DC Zip Code 20006 | | |
| Purpose of Disbursement Fundraising Expense Candidate Name | | 003 Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5177.13 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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) A. Summerwind | | Transaction ID: SB29.5822 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6 |
| Mailing Address 43 Hampton Falls Road | | Amount of Each Disbursement this Period 1455.00 |
| City Exeter State NH Zip Code 03833 | Purpose of Disbursement Fundraising 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 003 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Jeffrey Turcotte | | Transaction ID: SB29.5824 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6 |
| Mailing Address 807 North Howard Street #212 | | Amount of Each Disbursement this Period 1037.59 |
| City Alexandria State VA Zip Code 22304 | Purpose of Disbursement Political Travel Reimbursement 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 002 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Verizon | | Transaction ID: SB29.5804 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6 |
| Mailing Address 1300 Eye St, NW Suite 400W | | Amount of Each Disbursement this Period 1583.18 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Air Travel 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 002 |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4075.77 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 42

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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) A. Verizon | | Transaction ID: SB29.5817 | |
| Mailing Address PO Box 1 | | Date of Disbursement 11 / 03 / 2006 | |
| City Worcester | State MA | Zip Code 01654-0001 | Amount of Each Disbursement this Period 115.38 |
| Purpose of Disbursement Telephone | 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: | | | |

| | | |
|--|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 115.38 |
| TOTAL This Period (last page this line number only) | ▶ | 47732.18 |