

# 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

FAA Managers Association Inc. PAC

ADDRESS (number and street) 888 16th Street NW  
 Suite 530  
 Check if different than previously reported. (ACC)  
 Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00366070

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2006 through 09 30 2006

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

Type or Print Name of Treasurer Mr. Louis H Dupart

Signature of Treasurer Electronically Filed by Mr. Louis H Dupart Date 07 14 2008

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
FAA Managers Association Inc. PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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		74409.44
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	83835.85									
(c) Total Receipts (from Line 19) .....	26023.60	74152.01								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	109859.45	148561.45								
7. Total Disbursements (from Line 31) .....	74500.00	113202.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	35359.45	35359.45								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
FAA Managers Association Inc. PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10367.00	18507.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	15449.00	54929.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	25816.00	73436.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	25816.00	73436.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	207.60	716.01
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)) .....	26023.60	74152.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26023.60	74152.01

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	202.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	202.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74500.00	108500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	0.00	4500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	74500.00	113202.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74500.00	113202.00

**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 .....	25816.00	73436.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25816.00	73436.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	202.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	202.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 40  
(check only one)

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

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)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Harold A Albert

Mailing Address 39320 Tollhouse Road

City Lovettsville State VA Zip Code 20180

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4591

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
David H Alford

Mailing Address 19309 Moon Drive

City Tehachapi State CA Zip Code 93561

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4593

Amount of Each Receipt this Period 175.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Thomas P Anderson

Mailing Address 18791 Talarik Drive

City Eagle River State AR Zip Code 99577

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4596

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 420.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Alexander Appelhans, Jr.  
Mailing Address 2254 Smallwood Drive

City Ft. Collins State CO Zip Code 80525-8521

FEC ID number of contributing federal political committee. C

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2006  
**Transaction ID:** SA11AI.4597  
 Amount of Each Receipt this Period 175.00  
 Biweekly payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Michael A Astorino  
Mailing Address 177 Castaway Trail

City Mooreseville State NC Zip Code 28115

FEC ID number of contributing federal political committee. C

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2006  
**Transaction ID:** SA11AI.4601  
 Amount of Each Receipt this Period 175.00  
 Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Bert J Barnett  
Mailing Address 9460 Live Oak Place #104

City Ft. Lauderdale State FL Zip Code 33324

FEC ID number of contributing federal political committee. C

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2006  
**Transaction ID:** SA11AI.4612  
 Amount of Each Receipt this Period 140.00  
 Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... 490.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Donna L Betz

Mailing Address 5 Bon Ave.

City State Zip Code  
Merrimack NH 03054

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4617

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Dana T Boucher

Mailing Address 5815 El Monte

City State Zip Code  
Fairway KS 66205

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4628

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Glenn O Bridgeman, II

Mailing Address 9516 Ballagan Ct

City State Zip Code  
Bristow VA 20136

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4634

Amount of Each Receipt this Period  
20.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► **230.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Pamela Burger

Mailing Address 9175 Kearny Villa Road

City State Zip Code  
San Diego CA 92126

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4643

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Daniel C Bussey

Mailing Address 4897 Alijoanne Road

City State Zip Code  
Brighton MI 48116

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4648

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
John J Cahill

Mailing Address 20 Jennifer Drive

City State Zip Code  
Wappingers Falls NY 12590

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4650

Amount of Each Receipt this Period 84.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 329.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FAA Managers Association Inc. PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Norman T Cain	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address c/o FAA Cedar Rapids ATCT 9455 Shepard CT SW	<b>Transaction ID:</b> SA11AI.4651
	City Cedar Rapids State IA Zip Code 52404	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer FAA Managers Association Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) John J Callahan, Jr.	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 38905 Bear Creek	<b>Transaction ID:</b> SA11AI.4652
	City Grafton State OH Zip Code 44044	Amount of Each Receipt this Period 115.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer FAA Managers Association Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary R Carbonaro	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 156 Ridgeland Drive	<b>Transaction ID:</b> SA11AI.4655
	City Amherst State OH Zip Code 44001	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer FAA Managers Association Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>305.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 40

(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Randy W Carlson

Mailing Address 12979 North 66th Street

City State Zip Code  
Longmont CO 80503

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4657

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Marianna M Carnes

Mailing Address 15507 Darrow Road

City State Zip Code  
Vermilion OH 44089

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4658

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Jacquelyn M Christian

Mailing Address 88 South Bonneymead Circle

City State Zip Code  
Woodlands TX 77381

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4671

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... 350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FAA Managers Association Inc. PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert M Clyburn	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 2341 Dogwood Trail	<b>Transaction ID:</b> SA11AI.4673
	City State Zip Code Germantown TN 38139	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer Occupation FAA Managers Association Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David S Conley	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 1208 Elwood Road	<b>Transaction ID:</b> SA11AI.4679
	City State Zip Code Hammonton NJ 08037	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer Occupation FAA Managers Association Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Coschignano, Jr.	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 154 Old Country Road	<b>Transaction ID:</b> SA11AI.4686
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer Occupation FAA Managers Association Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>630.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 40
	<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)  
FAA Managers Association Inc. PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel R Cunningham	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 4600 Alexander Valley Dr. Apt 202	<b>Transaction ID:</b> SA11AI.4694
	City State Zip Code Charlotte NC 28270	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	Biweekly payroll deduction
	Name of Employer Occupation FAA Managers Association Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffery A Cunnyngnam	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 3268 Richele Ct.	<b>Transaction ID:</b> SA11AI.4695
	City State Zip Code Chino Hills CA 91709	Amount of Each Receipt this Period 98.00
	FEC ID number of contributing federal political committee. C	Biweekly payroll deduction
	Name of Employer Occupation FAA Managers Association Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Warren D Davis	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 1023 Drexelgate Lane	<b>Transaction ID:</b> SA11AI.4700
	City State Zip Code Upper Marlboro MD 20774	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Biweekly payroll deduction
	Name of Employer Occupation FAA Managers Association Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>333.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian L Debord		Date of Receipt
	Mailing Address 12868 Levi Road		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Willis	TX	77378
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FAA Managers Association		Occupation Supervisor	Transaction ID: SA11AI.4705
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="105.00"/>
Biweekly payroll deduction			

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert F Dobbelaar		Date of Receipt
	Mailing Address 869 Flounder Ave.		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	New Symrna Beach	FL	32169
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FAA Managers Association		Occupation Supervisor	Transaction ID: SA11AI.4709
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="105.00"/>
Biweekly payroll deduction			

<b>C.</b>	Full Name (Last, First, Middle Initial) Russell D Emmert		Date of Receipt
	Mailing Address 601 Hudnall CT		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Keller	TX	76248
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FAA Managers Association		Occupation Supervisor	Transaction ID: SA11AI.4721
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="105.00"/>
Biweekly payroll deduction			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="315.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 40  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Donald D Fedorowicz

Mailing Address 915 Welch Ave.

City State Zip Code  
Berthoud CO 80513

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4726

Amount of Each Receipt this Period  
210.00

Biweekly payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Robert A Fletcher

Mailing Address 21122 East Mineral Drive

City State Zip Code  
Aurora CO 80016-1926

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4730

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Carmine W Gallo

Mailing Address 3147 William St

City State Zip Code  
Wantagh NY 11793

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4740

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 525.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FAA Managers Association Inc. PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Kari M Gonter		Date of Receipt
	Mailing Address 23810 Green Haven Lane		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Ramona	CA	92065
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FAA Managers Association		Occupation Supervisor	Transaction ID: SA11AI.4751
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="400.00"/>	<input type="text" value="140.00"/>
Biweekly payroll deduction			

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert C Graham		Date of Receipt
	Mailing Address 2517 18th Street SE		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Puyallup	WA	98374
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FAA Managers Association		Occupation Supervisor	Transaction ID: SA11AI.4754
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="105.00"/>
Biweekly payroll deduction			

<b>C.</b>	Full Name (Last, First, Middle Initial) Cindy J Greene		Date of Receipt
	Mailing Address 20914 June Court		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Lakeville	MN	55044
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FAA Managers Association		Occupation Supervisor	Transaction ID: SA11AI.4756
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="175.00"/>
Biweekly payroll deduction			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="420.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 40

(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kevin D Haines

Mailing Address 2972 Robyn Dr.

City State Zip Code  
North Pole AK 99705

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11AI.4765

Amount of Each Receipt this Period

140.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Joseph J Heilmann

Mailing Address 14525 Bluebird Trail NE

City State Zip Code  
Prior Lake MN 55372

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11AI.4772

Amount of Each Receipt this Period

105.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Robert P Hildebidle

Mailing Address 237 NW 89th Ave.

City State Zip Code  
Coral Springs FL 33071

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11AI.4780

Amount of Each Receipt this Period

280.00

Biweekly payroll deduction

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

525.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Judy A Holcomb

Mailing Address 304 E. Ponderosa Drive

City State Zip Code  
Tuttle OK 73089

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4783

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Dahlette J Jacob

Mailing Address 6919 Augusta Pines Cove

City State Zip Code  
Spring TX 77389

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4794

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Michael J. Keyworth

Mailing Address 4509 Lake Charles Dr.

City State Zip Code  
Corpus Christi TX 78713

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

Name of Employer Occupation  
FAA Managers Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4813

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert R Knight	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 17056 Elsinore Dr.	<b>Transaction ID:</b> SA11AI.4818
	City State Zip Code Jacksonville FL 32226	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Alan A Kwiatkowski	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 23453 Woodview Drive	<b>Transaction ID:</b> SA11AI.4826
	City State Zip Code N. Olmstead OH 44070	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John A Lane	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 19938 War Admiral Road	<b>Transaction ID:</b> SA11AI.4829
	City State Zip Code Eagle River AK 99577	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
Name of Employer FAA Managers Association	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>455.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Anthony D Manzione

Mailing Address 317 Ashbury Road

City Winchester State VA Zip Code 22602

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4858

Amount of Each Receipt this Period 175.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Rhonda T McCarthy

Mailing Address 2470 Flippen Rd.

City Stockbridge State GA Zip Code 30281-5162

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4863

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Robert J McGrath, Jr.

Mailing Address PO Box 1173

City Fayetteville State GA Zip Code 30215

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

Name of Employer FAA Managers Association Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4870

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 455.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Daniel P Mullin

Mailing Address 16 Lincoln Circle

City State Zip Code  
Ivyland PA 18974

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

Name of Employer Occupation  
FAAMA Association Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4887

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Arthur T Nash

Mailing Address 2802 Smith Drive

City State Zip Code  
Endwell NY 13760

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4889

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Rhonda D Oldham

Mailing Address PO Box 461930

City State Zip Code  
Aurora CO 80046

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4894

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 40
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Deborah A Omowale	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 2536 High Street	<b>Transaction ID:</b> SA11AI.4897
	City State Zip Code Oakland CA 94601	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer FAAMA Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert H Peck	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 22 Walnut Ave.	<b>Transaction ID:</b> SA11AI.4901
	City State Zip Code Patchogue NY 11772	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer FAAMA Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Lori B Penwell	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 9168 N Sacred Sky Pl.	<b>Transaction ID:</b> SA11AI.4903
	City State Zip Code Marana AZ 85743	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer FAAMA Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 40
	<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)  
FAA Managers Association Inc. PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark G Phipps	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 13493 Falls Drive	<b>Transaction ID:</b> SA11AI.4910
	City State Zip Code Broomfield CO 80020-5186	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer Occupation FAAMA Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Deanna L Powell	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 38719 Bear Creek	<b>Transaction ID:</b> SA11AI.4916
	City State Zip Code Grafton OH 44044	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer Occupation FAAMA Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ellis L Powell	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address PO Box 4145	<b>Transaction ID:</b> SA11AI.4917
	City State Zip Code Leesburg VA 20177	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	Biweekly payroll deduction
	Name of Employer Occupation FAAMA Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 40

(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark O Ramp

Mailing Address 20510 Ptarmigan Blvd.

City State Zip Code  
Eagle River AK 99577

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11AI.4925

Amount of Each Receipt this Period

105.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth L Ray

Mailing Address 724 Chehaw Rd.

City State Zip Code  
Griffin GA 30223-6710

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11AI.4926

Amount of Each Receipt this Period

140.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)

Billy K Reed

Mailing Address 3020 Old Abilene Ct W

City State Zip Code  
Mobie AL 36605

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11AI.4928

Amount of Each Receipt this Period

140.00

Biweekly payroll deduction

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

385.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert J Roane

Mailing Address 7105 Overbrook Dr.

City Niwot State CO Zip Code 80503

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4931

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Carey D Rolofson

Mailing Address 13245 Timber Park Dr.

City Platte City State MT Zip Code 64079

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4935

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
John P Shisler

Mailing Address 1554 Ramae Drive

City Loveland State CO Zip Code 80537

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.4951

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► **420.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
John D Sideris

Mailing Address 4202 Cabarrus Court East

City Greensboro State NC Zip Code 27407-7350

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4953

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Ronald F Singletary

Mailing Address 2221 Rule Ave.

City Maryland Heights State MT Zip Code 63043

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4957

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Stephen L Smith

Mailing Address 17273 Pepperstock Lane

City Jeffersonton State VA Zip Code 22724

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2006

**Transaction ID:** SA11AI.4963

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 315.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
John A Taylor

Mailing Address 2404 SW 113 Terrace

City State Zip Code  
Oklahoma City OK 73170

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4982

Amount of Each Receipt this Period  
175.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Anthony C Tisdall

Mailing Address 7609 Bertito Lane

City State Zip Code  
Springfield VA 22153-1615

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4990

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Veronica Vaughan

Mailing Address 22 Westover Circle

City State Zip Code  
Mays Landing NJ 08330

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

Name of Employer Occupation  
FAAMA Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.4999

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 40  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ralph D Walters

Mailing Address 3500 Cottonwood Circle

City State Zip Code  
Longmont CO 80504

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.5007

Amount of Each Receipt this Period  
280.00

Biweekly payroll deduction

**B.**

Full Name (Last, First, Middle Initial)  
Mark D Ward

Mailing Address 507 Morgan Ct

City State Zip Code  
Hampton GA 30228

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.5008

Amount of Each Receipt this Period  
140.00

Biweekly payroll deduction

**C.**

Full Name (Last, First, Middle Initial)  
Irving E Washington, Jr.

Mailing Address 775 Gateway Dr SE

City State Zip Code  
Leesburg VA 20175

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

**Transaction ID:** SA11AI.5009

Amount of Each Receipt this Period  
105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **525.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Terri Lynn Waterman  
Mailing Address 8025 NW 124th St  
City Oklahoma City State OK Zip Code 73142  
FEC ID number of contributing federal political committee. **C**  
Name of Employer FAAMA Occupation Supervisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 09 / 25 / 2006  
Transaction ID: SA11AI.5011  
Amount of Each Receipt this Period 350.00  
Biweekly payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Robert P Wheeler  
Mailing Address 1511 Highland Lakes Dr.  
City Keller State TX Zip Code 76248  
FEC ID number of contributing federal political committee. **C**  
Name of Employer FAAMA Occupation Supervisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 09 / 25 / 2006  
Transaction ID: SA11AI.5018  
Amount of Each Receipt this Period 210.00  
Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Jonathon W White  
Mailing Address 1710 Kingsway  
City Oak Grove State MT Zip Code 64075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer FAAMA Occupation Supervisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt 09 / 25 / 2006  
Transaction ID: SA11AI.5020  
Amount of Each Receipt this Period 140.00  
Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 700.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 30 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kelley M Wilson

Mailing Address 39524 Denham Dr

City State Zip Code  
Palmdale CA 93551

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.5027

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction

**B.** Full Name (Last, First, Middle Initial)  
Eugene W Wygal

Mailing Address 1790 Evans Drive S

City State Zip Code  
Jacksonville Beach FL 32250

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.5034

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**C.** Full Name (Last, First, Middle Initial)  
Anthony M Wylie

Mailing Address 4921 Hartman Circle

City State Zip Code  
Anchorage AK 99507

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

Name of Employer FAAMA Occupation Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID:** SA11AI.5035

Amount of Each Receipt this Period 105.00

Biweekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00

**TOTAL** This Period (last page this line number only) ..... ► 10367.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 31 / 40	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) FAA Managers Association Inc. PAC
--

<b>A.</b>	Full Name (Last, First, Middle Initial) Family Horizons Credit Union	Date of Receipt
	Mailing Address 6665 E. 21st Street	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
	City State Zip Code Indianapolis IN 46219	<b>Transaction ID:</b> SA17.15198
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="207.60"/>
	Name of Employer Occupation	Interest income
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="716.01"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="207.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="207.60"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 40

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

A.	Full Name (Last, First, Middle Initial) BADGER FUND INC., THE	Transaction ID: SB23.5086
	Mailing Address P O Box 373 SUITE 215	Date of Disbursement MM / DD / YYYY 08 / 13 / 2006
	City Fairfax Station State VA Zip Code 22039	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Leadership PAC

B.	Full Name (Last, First, Middle Initial) BADGER FUND INC., THE	Transaction ID: SB23.5087
	Mailing Address P O Box 373 SUITE 215	Date of Disbursement MM / DD / YYYY 09 / 26 / 2006
	City Fairfax Station State VA Zip Code 22039	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Leadership PAC

C.	Full Name (Last, First, Middle Initial) BILL SHUSTER FOR CONGRESS	Transaction ID: SB23.5046
	Mailing Address PO Box 27	Date of Disbursement MM / DD / YYYY 08 / 13 / 2006
	City Hollidaysburg State PA Zip Code 16648	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name WILLIAM F SHUSTER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

A.	Full Name (Last, First, Middle Initial) BURNS VICTORY COMMITTEE	Transaction ID: SB23.5084 Date of Disbursement 08 / 13 / 2006
	Mailing Address 228 S WASHINGTON ST STE 115	Amount of Each Disbursement this Period 5000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement	Category/Type
	Candidate Name CONRAD BURNS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ joint fund-qualified
B.	Full Name (Last, First, Middle Initial) CITIZENS FOR TOM PETRI	Transaction ID: SB23.5058 Date of Disbursement 08 / 13 / 2006
	Mailing Address P.O. Box 270	Amount of Each Disbursement this Period 2000.00
	City Fond du Lac State WI Zip Code 54936	
	Purpose of Disbursement	Category/Type
	Candidate Name TOM PETRI	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) CITIZENS FOR TOM PETRI	Transaction ID: SB23.5079 Date of Disbursement 09 / 26 / 2006
	Mailing Address P.O. Box 270	Amount of Each Disbursement this Period 2500.00
	City Fond du Lac State WI Zip Code 54936	
	Purpose of Disbursement	Category/Type
	Candidate Name TOM PETRI	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

A.	Full Name (Last, First, Middle Initial) DAVID DAVIS VICTORY FUND	Transaction ID: SB23.5077
	Mailing Address 2016 NORTHWOOD DRIVE	Date of Disbursement 09 / 26 / 2006
	City JOHNSON CITY State TN Zip Code 37601	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	Category/Type
	Candidate Name DAVID DAVIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM OBERSTAR	Transaction ID: SB23.5044
	Mailing Address 1017 8th St. NE	Date of Disbursement 08 / 11 / 2006
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement	Category/Type
	Candidate Name JAMES L HON. OBERSTAR	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM OBERSTAR	Transaction ID: SB23.5056
	Mailing Address 1017 8th St. NE	Date of Disbursement 08 / 13 / 2006
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement	Category/Type
	Candidate Name JAMES L HON. OBERSTAR	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

A.	Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS	Transaction ID: SB23.5040 Date of Disbursement 07 / 14 / 2006
	Mailing Address 2345 Grand Suite 2400	Amount of Each Disbursement this Period 4000.00
	City Kansas City State MO Zip Code 64108	
	Purpose of Disbursement	Category/Type
	Candidate Name SAMUEL B 'SAM' GRAVES	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS	Transaction ID: SB23.5071 Date of Disbursement 09 / 26 / 2006
	Mailing Address 2345 Grand Suite 2400	Amount of Each Disbursement this Period 1000.00
	City Kansas City State MO Zip Code 64108	
	Purpose of Disbursement	Category/Type
	Candidate Name SAMUEL B 'SAM' GRAVES	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) HEATHER WILSON FOR CONGRESS	Transaction ID: SB23.5054 Date of Disbursement 08 / 13 / 2006
	Mailing Address P.O. BOX 14070 P.O. BOX 14070	Amount of Each Disbursement this Period 1000.00
	City ALBUQUERQUE State NM Zip Code 87191	
	Purpose of Disbursement	Category/Type
	Candidate Name HEATHER A WILSON	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>HEATHER WILSON FOR CONGRESS</b></p> <p>Mailing Address P.O. BOX 14070 P.O. BOX 14070</p> <p>City ALBUQUERQUE State NM Zip Code 87191</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <b>HEATHER A WILSON</b> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 00</p>	<p><b>Transaction ID:</b> SB23.5074 <b>Date of Disbursement</b> 09 / 26 / 2006</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>JUDGE JOHN CARTER FOR CONGRESS COMMITTEE</b></p> <p>Mailing Address P O BOX 6930</p> <p>City ROUND ROCK State TX Zip Code 78683</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <b>JOHN CARTER</b> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 31</p>	<p><b>Transaction ID:</b> SB23.5069 <b>Date of Disbursement</b> 09 / 11 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>KAY GRANGER CAMPAIGN FUND</b></p> <p>Mailing Address 715 Jones Street Suite 101</p> <p>City Fort Worth State TX Zip Code 76102</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <b>KAY GRANGER</b> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 12</p>	<p><b>Transaction ID:</b> SB23.5050 <b>Date of Disbursement</b> 08 / 13 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p>

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

7000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
MIKE DEWINE FOR US SENATE

Mailing Address PO BOX 340188

City COLUMBUS State OH Zip Code 43234

Purpose of Disbursement

Candidate Name  
RICHARD MICHAEL DEWINE

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5038

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

Candidate Name  
PATTY MURRAY

Category/  
Type

Office Sought:  House  Senate  President  
State: WA District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5075

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
PEOPLE FOR PETE DOMENICI

Mailing Address POST OFFICE BOX 93656

City ALBUQUERQUE State NM Zip Code 87119

Purpose of Disbursement

Candidate Name  
PETE V DOMENICI

Category/  
Type

Office Sought:  House  Senate  President  
State: NM District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5060

Date of Disbursement

08 / 13 / 2006

Amount of Each Disbursement this Period

5000.00

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

12500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PORTER FOR CONGRESS Mailing Address PO Box 26087 City Las Vegas State NV Zip Code 89126 Purpose of Disbursement Candidate Name JON SR PORTER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5081 Date of Disbursement 09 / 26 / 2006
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) RAY MEIER FOR CONGRESS COMMITTEE Mailing Address PO Box 120 City Utica State NY Zip Code 13503 Purpose of Disbursement Candidate Name RAYMOND MEIER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5072 Date of Disbursement 09 / 26 / 2006
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) REGULA FOR CONGRESS COMMITTEE Mailing Address 228 S. Washington St. Ste. 115 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Candidate Name RALPH REGULA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5064 Date of Disbursement 09 / 11 / 2006
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

8500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT ADERHOLT FOR CONGRESS**

Mailing Address P. O. Box 1158  
940 HWY 13

City State Zip Code  
Haleyville AL 35565

Purpose of Disbursement

Candidate Name  
ROBERT B. ADERHOLT

Office Sought:  House  
 Senate  
 President

State: AL District: 04

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5062

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**SWEENEY FOR CONGRESS INC**

Mailing Address Post Office Box 1465

City State Zip Code  
Clifton Park NY 12065

Purpose of Disbursement

Candidate Name  
JOHN E. SWEENEY

Office Sought:  House  
 Senate  
 President

State: NY District: 20

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5042

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**TALENT FOR SENATE COMMITTEE**

Mailing Address 9467 DIELMAN ROCK ISLAND DRIVE

City State Zip Code  
SAINT LOUIS MO 63132

Purpose of Disbursement

Candidate Name  
JAMES M TALENT

Office Sought:  House  
 Senate  
 President

State: MO District: 02

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.15188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

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NAME OF COMMITTEE (In Full)  
FAA Managers Association Inc. PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) TEXANS FOR HENRY BONILLA</p> <p>Mailing Address P.O. Box 17292</p> <p>City San Antonio State TX Zip Code 78217</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name HENRY BONILLA Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ special election</p>	<p><b>Transaction ID:</b> SB23.5083</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6</p> <p>Amount of Each Disbursement this Period <input type="text" value="2500.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) TIM JOHNSON FOR SOUTH DAKOTA INC</p> <p>Mailing Address PO BOX 1859</p> <p>City SIOUX FALLS State SD Zip Code 57101</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name TIM JOHNSON Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5048</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 6</p> <p>Amount of Each Disbursement this Period <input type="text" value="1500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) WALSH FOR CONGRESS COMMITTEE</p> <p>Mailing Address 4969 HORIZON TERRACE</p> <p>City SYRACUSE State NY Zip Code 13215</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name JAMES T WALSH Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15195</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 6</p> <p>Amount of Each Disbursement this Period <input type="text" value="2500.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="74500.00"/>