



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
All America PAC

Report Covering the Period: From: 

|   |   |
|---|---|
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| 3 | 1 |

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| Y | Y | Y | Y |
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|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>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>7</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 7 |  | 254446.08 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 0                                 | 7 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 197073.53               |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 383392.13               | 665152.00                         |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 580465.66               | 919598.08                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 156758.81               | 495891.23                         |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 423706.85               | 423706.85                         |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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  
All America PAC

Report Covering the Period: From: 

|   |   |
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| M | M |
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 To: 

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| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 275401.00                     | 497366.14                         |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 30.00                         | 45.00                             |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 275431.00                     | 497411.14                         |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 102000.00                     | 148250.00                         |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 377431.00                     | 645661.14                         |
| 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) ..... | 1180.22                       | 13206.74                          |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 4780.91                       | 6284.12                           |
| 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)) .....                          | 383392.13                     | 665152.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 383392.13                     | 665152.00                         |

**DETAILED SUMMARY PAGE**

of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>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.....  | 139247.47                     | 474896.89                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                          | 139247.47                     | 474896.89                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 13500.00                      | 15500.00                          |
| 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 .....                                  | 4011.34                       | 9011.34                           |
| (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)) .....                           | 4011.34                       | 9011.34                           |
| 29. Other Disbursements.....   | 0.00                          | -3517.00                          |
| 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))..       | 156758.81                     | 495891.23                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 156758.81                     | 495891.23                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) .....        | 377431.00                     | 645661.14                         |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 4011.34                       | 9011.34                           |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 373419.66                     | 636649.80                         |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 139247.47                     | 474896.89                         |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 1180.22                       | 13206.74                          |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 138067.25                     | 461690.15                         |

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

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

FOR LINE NUMBER: PAGE 6 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Ralph H. Isham

Mailing Address 1215 Fifth Avenue

City State Zip Code  
New York NY 10029

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

Name of Employer Occupation  
GH Venture Partners, LLC President & Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

**Transaction ID:** C14570280

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Brian W. Fitzgerald

Mailing Address PO Box 1093

City State Zip Code  
Middleburg VA 20118

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

Name of Employer Occupation  
Bingham McCutchen Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 7

**Transaction ID:** C13261120

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
James A. Schellinger

Mailing Address 1430 East 82nd Street

City State Zip Code  
Indianapolis IN 46240

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

Name of Employer Occupation  
CSO Architect Engineers Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

**Transaction ID:** C10567680

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

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

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 7 / 120 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
All America PAC

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Panna B. Barai  | Date of Receipt<br>MM / DD / YYYY<br>08 / 26 / 2007 |
|           | Mailing Address 9903 Twin Creek Boulevard  | <b>Transaction ID:</b> C12055120                    |
|           | City State Zip Code<br>Munster IN 46321  | Amount of Each Receipt this Period<br>5000.00       |
|           | FEC ID number of contributing federal political committee.<br>C  |   |
|           | Name of Employer Self-Employed<br>Occupation Physician<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>5000.00 |   |

|           |  |   |
|-----------|--|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Kevin A. Rahrig   | Date of Receipt<br>MM / DD / YYYY<br>08 / 06 / 2007 |
|           | Mailing Address 19530 Roosevelt Road   | <b>Transaction ID:</b> C10596740                    |
|           | City State Zip Code<br>South Bend IN 46614   | Amount of Each Receipt this Period<br>1000.00       |
|           | FEC ID number of contributing federal political committee.<br>C  |   |
|           | Name of Employer AM General<br>Occupation Program Executive - Commerce<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>1000.00 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Terri Chancellor  | Date of Receipt<br>MM / DD / YYYY<br>11 / 21 / 2007 |
|           | Mailing Address 7700 Henze Rd  | <b>Transaction ID:</b> C13307020                    |
|           | City State Zip Code<br>Evansville IN 47720-1972  | Amount of Each Receipt this Period<br>5000.00       |
|           | FEC ID number of contributing federal political committee.<br>C  |   |
|           | Name of Employer N/A<br>Occupation Homemaker<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>5000.00 |   |

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <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  
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FOR LINE NUMBER: PAGE 8 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Lester Coney

Mailing Address 4722 South Greenwood Ave

City State Zip Code  
Chicago IL 60615-1930

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

Name of Employer Mesirow Financial      Occupation Senior Managing Director

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** C14546870

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Anne R. Avis

Mailing Address 1545 Waverly Street

City State Zip Code  
Palo Alto CA 94301

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

Name of Employer N/A      Occupation Homemaker

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 8 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** C12083530

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Steven J. Sersic

Mailing Address 5703 Sandstone Drive

City State Zip Code  
Wheatfield IN 46392

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

Name of Employer Self Employed      Occupation Engineer

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      750.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** C14546890

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6250.00**

**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 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
David Lockwood

Mailing Address 420 Maple Street

City State Zip Code  
Palo Alto CA 94301

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

Name of Employer Occupation  
Liberate Technology CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 5 | / | 2 | 0 | 0 | 7 |

Transaction ID: C13259570

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

**B.**

Full Name (Last, First, Middle Initial)  
John Jarrell

Mailing Address 4917 Donovan Drive

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Mayer Brown Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 3 | 1 | / | 2 | 0 | 0 | 7 |

Transaction ID: C14548590

Amount of Each Receipt this Period

|         |
|---------|
| 2500.00 |
|---------|

**C.**

Full Name (Last, First, Middle Initial)  
Michael S. Gouloff

Mailing Address 11117 Carnoustie Lane

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Schenkel Shultz Architecture Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 3 | 1 | / | 2 | 0 | 0 | 7 |

Transaction ID: C14570281

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

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

|          |
|----------|
| 12500.00 |
|----------|

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Howard Gittis

Mailing Address 760 Park Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
MacAndrews & Forbes Vice Chair & CAO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2007

**Transaction ID:** C10596731

Amount of Each Receipt this Period  
2300.00

**B.** Full Name (Last, First, Middle Initial)  
Laura R. Schellinger

Mailing Address 1430 East 82nd Street

City State Zip Code  
Indianapolis IN 46240

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

Name of Employer Occupation  
CSO Schenkel Shultz Business Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2007

**Transaction ID:** C10567681

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Todd Davison

Mailing Address 129 E 88th St

City State Zip Code  
New York NY 10128-1107

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

Name of Employer Occupation  
Morgan Stanley Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2007

**Transaction ID:** C10596561

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5800.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 120  
(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ricky R. Smith

Mailing Address 170 Lake Forest Court

City Niles State MI Zip Code 49120

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

Name of Employer AM General Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 06 / 2007

Transaction ID: C10596741

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
David R Zook

Mailing Address 3607 North Albemarle Street

City Arlington State VA Zip Code 22207-4335

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

Name of Employer Baker & Daniels Occupation Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 21 / 2007

Transaction ID: C13307021

Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven E. Chancellor

Mailing Address PO Box 592

City Evansville State IN Zip Code 47704

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

Name of Employer Black Beauty Coal Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 21 / 2007

Transaction ID: C13307041

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Gregory M. Avis

Mailing Address 1545 Waverley Street

City Palo Alto State CA Zip Code 94301

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

Name of Employer Summit Partners Occupation Venture Capitalist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 1 8 / 2 0 0 7

**Transaction ID:** C12083531

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Bruce N. Davis

Mailing Address 421 Collingwood Street

City San Francisco State CA Zip Code 94114

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

Name of Employer Elmer's Restaurants Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 5 / 2 0 0 7

**Transaction ID:** C13259571

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 4445 Willard Ave  
12th Floor

City Chevy Chase State MD Zip Code 20815

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

Name of Employer CapitalSource Occupation Chairman & CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 2 / 0 1 / 2 0 0 7

**Transaction ID:** C14548241

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

**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 13 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bill Moreau, Jr.

Mailing Address 5764 N. Delaware Street

City State Zip Code  
Indianapolis IN 46220

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

Name of Employer Occupation  
Barnes & Thornburg, LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: C14548591

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Craig L. Platt

Mailing Address 622 Third Avenue  
11th Floor

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
Oppenheimer Executive Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: C10557512

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Barry F. Schwartz

Mailing Address 35 East 62nd Street

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
MacAndrews & Forbes Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: C10596732

Amount of Each Receipt this Period

2300.00

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

8300.00

**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 14 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark A. Whalen

Mailing Address 15511 Spring Meadow Lane

City State Zip Code  
Granger IN 46530

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

Name of Employer Occupation  
AM General Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2007

**Transaction ID:** C10596742

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ted Bristol

Mailing Address 3123 Sleepy Hollow Road

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation  
B&D Consulting Senior Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** C13307022

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert V. Alvarado

Mailing Address 41 Santa Catalina Drive

City State Zip Code  
Rancho Palos Verde CA 90275

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

Name of Employer Occupation  
Court Call CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
10 / 18 / 2007

**Transaction ID:** C12083512

Amount of Each Receipt this Period  
2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4400.00

**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 15 / 120  
(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Laurence D. Belfer

Mailing Address 767 Fifth Avenue  
4th Floor

City State Zip Code  
New York NY 10153

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

Name of Employer Occupation  
Belfer Management, LLC President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 8 | / | 2 | 0 | 0 | 7 |

Transaction ID: C12083532

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

**B.**

Full Name (Last, First, Middle Initial)  
Gregory L. Gibson

Mailing Address PO Box 478

City State Zip Code  
Terre Haute IN 47808

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

Name of Employer Occupation  
ReTec Corporation President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 5 | / | 2 | 0 | 0 | 7 |

Transaction ID: C13259562

Amount of Each Receipt this Period

|         |
|---------|
| 2000.00 |
|---------|

**C.**

Full Name (Last, First, Middle Initial)  
Scott Parven

Mailing Address 8817 Sleeping Hollow Lane

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
Parven, Pomplér, Schuyler Inc. President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 9 | / | 2 | 0 | 0 | 7 |

Transaction ID: C14548612

Amount of Each Receipt this Period

|         |
|---------|
| 2500.00 |
|---------|

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

|         |
|---------|
| 9500.00 |
|---------|

**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 16 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Adam M. Aron

Mailing Address 1331 Brickell Bay Dr

City State Zip Code  
Miami FL 33131-3690

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

Name of Employer Occupation  
World Leisure Partners, Inc. Chairman & CEO

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1101.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 0 / 2 0 0 7

Transaction ID: C14576073

Amount of Each Receipt this Period

1101.00

\* In-Kind: Catering

**B.**

Full Name (Last, First, Middle Initial)  
Leland E. Boren

Mailing Address P.O. Box 183

City State Zip Code  
Upland IN 46989

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

Name of Employer Occupation  
Avis Industrial Corporation Vice President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

Transaction ID: C10567703

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary L. Wuslich

Mailing Address 15801 Ashville Lane

City State Zip Code  
Granger IN 46530

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

Name of Employer Occupation  
AM General Vice President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: C10596583

Amount of Each Receipt this Period

1000.00

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

7101.00

**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 17 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ronald O. Perelman

Mailing Address 65 East 62nd Street

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
MacAndrews & Forbes Chairman, CEO & Founder

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: C10596733

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Chris Alexander Peirson

Mailing Address 1235 Lausanne

City State Zip Code  
Dallas TX 75208-2731

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

Name of Employer Occupation  
Peirson Patterson, LLP Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 7 / 2 0 0 7

Transaction ID: C10596743

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
David B. Singer

Mailing Address 3745 21st Street

City State Zip Code  
San Francisco CA 94114

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

Name of Employer Occupation  
Maverick Capital Principal

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307023

Amount of Each Receipt this Period

5000.00

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

12300.00

**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 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Anne A. Petrovic

Mailing Address 8713 Balmoral Court

City State Zip Code  
Burr Ridge IL 60527

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

Name of Employer Occupation  
Advanced Practical Solutions LLC Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: C14546883

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
J. Timothy McGinley

Mailing Address 8709 Williamshire E Drive

City State Zip Code  
Indianapolis IN 46260

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

Name of Employer Occupation  
House Investments Managing Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

Transaction ID: C10567684

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
LaRita Boren

Mailing Address P.O. Box 183

City State Zip Code  
Upland IN 46989

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

Transaction ID: C10567704

Amount of Each Receipt this Period

5000.00

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

7000.00

**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 19 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Phoebe Crane  
Mailing Address 1585 North US 421  
City Whitestown State IN Zip Code 46075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 10 / 06 / 2007  
Transaction ID: C12055114  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
James A. Armour  
Mailing Address 51818 Oakbrook Court  
City Granger State IN Zip Code 46530  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AM General Occupation Chairman & CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 08 / 06 / 2007  
Transaction ID: C10596584  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert J. Gula  
Mailing Address 5703 Alber Road  
City Saline State MI Zip Code 48176  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AM General Occupation Sr. Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 08 / 06 / 2007  
Transaction ID: C10596734  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12500.00  
**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 20 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edward Knight

Mailing Address 32 W. Irving Street

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
NASDAQ General Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307024

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Pearlman

Mailing Address 355 Bryant Street  
Suite 100

City State Zip Code  
San Francisco CA 94107

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

Name of Employer Occupation  
Rearden, LLC Entrepreneur

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: C12083504

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Rashid Hallaway

Mailing Address 2400 M Street NW  
#207

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation  
Ameriquel Holdings Vice President

Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C13259574

Amount of Each Receipt this Period

1000.00

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

7000.00

**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 / 120  
(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Sandra Wuliger

Mailing Address 20 Brasswood Lane

City State Zip Code  
Moreland Hills OH 44022-1377

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2007

**Transaction ID:** C14548634

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
John Richardson

Mailing Address 2732 P Street, NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Abbott Fund Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2007

**Transaction ID:** C14570325

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark Hasten

Mailing Address 1115 W. 75th Street

City State Zip Code  
Indianapolis IN 46260-3410

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

Name of Employer Hasten Bancshares Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2007

**Transaction ID:** C14570355

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

**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 / 120  
(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"/>            |     | <input type="checkbox"/> |     | <input type="checkbox"/> |     | <input type="checkbox"/> | 17 |

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Ann M. Bochnowski

Mailing Address 10203 Cherrywood Lane

City State Zip Code  
Munster IN 46321

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

Name of Employer Self Employed Occupation  
Self Employed Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2007

Transaction ID: C10567685

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Herb Simon

Mailing Address 665 Buena Vista Drive

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Melvin Simon & Associates, Inc Occupation  
CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2007

Transaction ID: C10567695

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Steven C. Crane

Mailing Address 1585 North US 421

City State Zip Code  
Whitestown IN 46075

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

Name of Employer Crane Capital Management Occupation  
Chairman & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 06 / 2007

Transaction ID: C12055115

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

**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 23 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Deborah A Cafiero

Mailing Address 51128 Shamrock Hills Road

City State Zip Code  
Granger IN 46530

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

Name of Employer Occupation  
AM General Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2007

**Transaction ID:** C10596735

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Bruce Karsh

Mailing Address 1201 Tower Grove Drive

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Oaktree Capital President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2007

**Transaction ID:** C13307015

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Rob Ehrich

Mailing Address 644 North Carolina Ave SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation  
B&D Consulting Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** C13307025

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

**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 24 / 120                |
|   | <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)  
All America PAC

|   |   |                          |   |
|---|---|--------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Ralph Schlosstein        |                          | Date of Receipt   |
|   | Mailing Address 820 Park Avenue<br>8th Floor                        |                          | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y<br>1 0 / 1 8 / 2 0 0 7 |
|   | City  | State                    | Zip Code  |
|   | New York  | NY                       | 10021   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                          | <b>Transaction ID:</b> C12083495  |
| Name of Employer<br>BlackRock, Inc.   |   | Occupation<br>President  | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼ | <input type="text"/><br>5000.00   |

|   |   |                          |   |
|---|---|--------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Julie Reeder             |                          | Date of Receipt   |
|   | Mailing Address 750 North Rush Street<br>No. 1405                   |                          | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y<br>1 2 / 1 4 / 2 0 0 7 |
|   | City  | State                    | Zip Code  |
|   | Chicago   | IL                       | 60611   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                          | <b>Transaction ID:</b> C14546885  |
| Name of Employer<br>The Pritzker Group  |   | Occupation<br>Consultant | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼ | <input type="text"/><br>250.00  |

|   |   |                          |   |
|---|---|--------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Keith Raffel             |                          | Date of Receipt   |
|   | Mailing Address 275 Southwood Drive                                 |                          | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y<br>1 0 / 1 8 / 2 0 0 7 |
|   | City  | State                    | Zip Code  |
|   | Palo Alto   | CA                       | 94301   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                          | <b>Transaction ID:</b> C12083515  |
| Name of Employer<br>Upshot  |   | Occupation<br>Founder    | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼ | <input type="text"/><br>5000.00   |

|  |                                  |
|--|----------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/><br>10250.00 |
| <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 25 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Dragan Vjestica

Mailing Address 10314 Applewood Ct

City State Zip Code  
Munster IN 46321-5129

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2007

**Transaction ID:** C14546875

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1201 Pennsylvania Avenue NW Suite 617

City State Zip Code  
Washington DC 20004

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

Name of Employer Promontory Financial Occupation CEO & Founder

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2007

**Transaction ID:** C13259565

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Joseph Feshbach

Mailing Address 21 Barkers Point Road

City State Zip Code  
Sands Point NY 11050

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

Name of Employer Joe Feshback Partners Occupation Managing Member

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 12 / 2007

**Transaction ID:** C14548195

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

**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 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jacqueline S. Simon

Mailing Address 10555 Hussey Lane

City State Zip Code  
Carmel IN 46032

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 9 / 2 0 0 7

Transaction ID: C14548655

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
John A. Kite

Mailing Address 7980 Wooden Drive

City State Zip Code  
Indianapolis IN 46260

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

Name of Employer Occupation  
Kite Realty Group President & CEO

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

Transaction ID: C10567686

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Felson Bowman

Mailing Address PO Box 47068

City State Zip Code  
Indianapolis IN 46247-0068

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

Name of Employer Occupation  
Solar Sources Owner

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

Transaction ID: C10567696

Amount of Each Receipt this Period

2000.00

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

8000.00

**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 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael G. Browning

Mailing Address 6100 West 96th Street  
Suite 250

City Indianapolis State IN Zip Code 46278

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

Name of Employer Browning Investments Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
10 / 06 / 2007

**Transaction ID:** C12055116

Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Walter R. Botich, Jr.

Mailing Address 3325 Deer Lake Drive

City South Bend State IN Zip Code 46614

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

Name of Employer AM General Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 06 / 2007

**Transaction ID:** C10596736

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
James R. Gates

Mailing Address 1904 Forest View Avenue

City Hillsborough State CA Zip Code 94010

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

Name of Employer Texas Pacific Group Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
08 / 07 / 2007

**Transaction ID:** C10596746

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00

**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 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert Hoopes

Mailing Address 5609 Roosevelt Street

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
VOX Global Mandate President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307026

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
J.B. Pritzker

Mailing Address 2888 Sheridan Place

City State Zip Code  
Evanston IL 60201

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

Name of Employer Occupation  
The Pritzker Group Managing Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: C14546896

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Mel Levine

Mailing Address 330 Oceano Drive

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer Occupation  
Gibson, Dunn & Crutcher Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C13259566

Amount of Each Receipt this Period

1000.00

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

2500.00

**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 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
David E. Simon

Mailing Address 10555 Hussey Lane

City State Zip Code  
Carmel IN 46032

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

Name of Employer Occupation  
Simon Debartlo Group CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 19 / 2007

**Transaction ID:** C14548656

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Caleb E. Baker

Mailing Address 9305 Jesup Lane

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
Baker Consulting President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2007

**Transaction ID:** C13261117

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey H. Smulyan

Mailing Address 5101 Green Braes East Drive

City State Zip Code  
Indianapolis IN 46234

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

Name of Employer Occupation  
Emmis Communications Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2007

**Transaction ID:** C10567687

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11500.00**

**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 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael B. O'Connor

Mailing Address 543 North Audubon Road

City State Zip Code  
Indianapolis IN 46219

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

Name of Employer Occupation  
Bose Public Affairs Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 6 / 2 0 0 7

Transaction ID: C12055117

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul J Cafiero

Mailing Address 51128 Shamrock Hills Road

City State Zip Code  
Granger IN 46530

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

Name of Employer Occupation  
AM General Sr. VP Finance & CFO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: C10596737

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Malcolm Heinicke

Mailing Address 1738 14th Avenue

City State Zip Code  
San Francisco CA 94122

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

Name of Employer Occupation  
Munger Tolles & Olson Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C13259567

Amount of Each Receipt this Period

500.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 120  
(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Peter L. Thoren

Mailing Address 31 Outlook Dr

City Darien State CT Zip Code 06820-5617

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

Name of Employer Access Industries Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 07 / 03 / 2007  
**Transaction ID: C1055377**  
 Amount of Each Receipt this Period: 2500.00

**B.**

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

Mailing Address 301 Sheridan Rd

City Winnetka State IL Zip Code 60093-4227

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

Name of Employer CDW Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 11 / 30 / 2007  
**Transaction ID: C14548317**  
 Amount of Each Receipt this Period: 2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Tony Matutis

Mailing Address 5239 W. 136th Place

City Crestwood State IL Zip Code 60445

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

Name of Employer Industrial Steel Construction Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 01 / 2007  
**Transaction ID: C14548597**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

**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 32 / 120

(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)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Linda Harrington Baker

Mailing Address 9305 Jesup Lane

City State Zip Code  
Bethesda MD 20814

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2007

**Transaction ID:** C13261118

Amount of Each Receipt this Period  
3500.00

**B.** Full Name (Last, First, Middle Initial)  
Harlan Carter Hamilton

Mailing Address 30 Ron Place

City State Zip Code  
Germantown OH 45327-1617

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

Name of Employer AM General Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2007

**Transaction ID:** C10596738

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Andrew S. Lowenthal

Mailing Address 12006 River Road

City State Zip Code  
Potomac MD 20854

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

Name of Employer Porterfield & Lowenthal LLC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
12 / 22 / 2007

**Transaction ID:** C14550058

Amount of Each Receipt this Period  
1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 33 / 120  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Taggart Birge  
Mailing Address 35 E. 58th Street  
City Indianapolis State IN Zip Code 46220  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lauth Property Group Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00  
Date of Receipt 08 / 26 / 2007  
Transaction ID: C12055118  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Stern  
Mailing Address 3185 Stockton Place  
City Palo Alto State CA Zip Code 94303  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cooley Godward, LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 10 / 18 / 2007  
Transaction ID: C12083498  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Rughuveer P. Nayak  
Mailing Address 124 Covington Court  
City Oak Brook State IL Zip Code 60523  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Rogers Park One Day Surgery Center Occupation Pharmacist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 11 / 21 / 2007  
Transaction ID: C13307018  
Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00  
**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 34 / 120  
(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)  
All America PAC

**A.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Fred S. Flegel   |                                     | Date of Receipt<br>MM / DD / YYYY<br>10 / 18 / 2007 |
| Mailing Address 171 Scenic Woods Court  |                                     | <b>Transaction ID:</b> C12083518                    |
| City<br>Saint Louis   | State<br>MO                         | Zip Code<br>63141                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     | Amount of Each Receipt this Period<br>5000.00       |
| Name of Employer<br>Lopata Flegel & Company<br>LLP  | Occupation<br>Managing Partner      |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

**B.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Alvin S. Trenk   |                                     | Date of Receipt<br>MM / DD / YYYY<br>12 / 12 / 2007 |
| Mailing Address 400 N. Flagler Drive<br>#1101   |                                     | <b>Transaction ID:</b> C14548198                    |
| City<br>West Palm Beach   | State<br>FL                         | Zip Code<br>33401                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     | Amount of Each Receipt this Period<br>5000.00       |
| Name of Employer<br>Air Pegasus   | Occupation<br>Founder               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00 |   |

**C.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>William W. Hanka   |                                     | Date of Receipt<br>MM / DD / YYYY<br>11 / 13 / 2007 |
| Mailing Address 4016 14th Street NW   |                                     | <b>Transaction ID:</b> C13261119                    |
| City<br>Washington  | State<br>DC                         | Zip Code<br>20011                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer<br>Ferguson Group  | Occupation<br>Partner               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |   |

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 11000.00 |
| <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 35 / 120  
 (check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Matthew R. Gutwein

Mailing Address 859 Woodruff Place West Drive

City Indianapolis State IN Zip Code 46201

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

Name of Employer Baker & Daniels Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 17 / 2007  
**Transaction ID: C10567689**  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Bharat H. Barai

Mailing Address 9903 Twin Creek Boulevard

City Munster State IN Zip Code 46321

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

Name of Employer Self Employed Occupation Physician

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 08 / 26 / 2007  
**Transaction ID: C12055119**  
 Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Kevin D. O'Rear

Mailing Address 14351 Avondale Drive

City Granger State IN Zip Code 46530

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

Name of Employer AM General Corporation Occupation Vice President & General Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 06 / 2007  
**Transaction ID: C10596739**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 36 / 120                |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
All America PAC

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Heather Smulyan   | Date of Receipt<br>MM / DD / YYYY<br>11 / 21 / 2007 |
|           | Mailing Address 5101 Green Braes E. Drive  | <b>Transaction ID:</b> C13307019                    |
|           | City State Zip Code<br>Indianapolis IN 46234   | Amount of Each Receipt this Period<br>5000.00       |
|           | FEC ID number of contributing federal political committee.<br>C  |   |
|           | Name of Employer N/A Occupation Homemaker<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)<br>Aggregate Year-to-Date 5000.00 |   |

|           |  |   |
|-----------|--|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Anthony M. Portone  | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |
|           | Mailing Address 10017 Tanglewood Court   | <b>Transaction ID:</b> C14546869                    |
|           | City State Zip Code<br>Munster IN 46321  | Amount of Each Receipt this Period<br>500.00        |
|           | FEC ID number of contributing federal political committee.<br>C  |   |
|           | Name of Employer Lake County Transfer Occupation President<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)<br>Aggregate Year-to-Date 500.00 |   |

|           |   |   |
|-----------|---|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Caleb E. Baker   | Date of Receipt<br>MM / DD / YYYY<br>10 / 18 / 2007 |
|           | Mailing Address 9305 Jesup Lane   | <b>Transaction ID:</b> C12083499                    |
|           | City State Zip Code<br>Bethesda MD 20814  | Amount of Each Receipt this Period<br>2500.00       |
|           | FEC ID number of contributing federal political committee.<br>C   |   |
|           | Name of Employer Baker Consulting Occupation President & CEO<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)<br>Aggregate Year-to-Date 5000.00 |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 8000.00 |
| <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 37 / 120  
 (check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
Howard Zeprun

Mailing Address 505 Hamilton Avenue

City State Zip Code  
Palo Alto CA 94301

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

Name of Employer Occupation  
Trident Capital Inc Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: C12083519

Amount of Each Receipt this Period  
2500.00

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2500.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 275401.00 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Vectren Corporation Employees Federal PAC  
Mailing Address One Vectren Square

City State Zip Code  
Evansville IN 47708

FEC ID number of contributing federal political committee. **C** C00240069

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 7

Transaction ID: C14576070

Amount of Each Receipt this Period

5000.00

\* In-Kind: Catering/Event Tickets

**B.**

Full Name (Last, First, Middle Initial)  
B & D Sagamore PAC  
Mailing Address 300 N Meridian St Ste 2700

City State Zip Code  
Indianapolis IN 46204-1750

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C14593810

Amount of Each Receipt this Period

1991.62

**C.**

Full Name (Last, First, Middle Initial)  
Manufactured Housing Institute PAC  
Mailing Address 2101 Wilson Blvd #610

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00043463

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307030

Amount of Each Receipt this Period

2500.00

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

9491.62

**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 39 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Nat'l Assoc. of Professional Surplus Lines Offices

Mailing Address 805 15th Street NW  
#700

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00417634

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 1 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** C13307040

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Zurich Holding Co. of America Committee (Z-PAC)

Mailing Address 1201 F Street NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00235036

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 2 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** C14548200

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Council of Insurance Agents & Brokers PAC

Mailing Address 701 Pennsylvania Ave NW  
#750

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** C14548320

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
B & D Sagamore PAC

Mailing Address 300 N Meridian St Ste 2700

City State Zip Code  
Indianapolis IN 46204-1750

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: C14594451

Amount of Each Receipt this Period

508.38

\* In-Kind: Catering

**B.**

Full Name (Last, First, Middle Initial)  
American Hospital Association PAC

Mailing Address 325 Seventh Street NW Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 3 / 2 0 0 7

Transaction ID: C10596581

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Investment Company Institute PAC (ICI PAC)

Mailing Address 1401 H Street NW  
#1200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C13259561

Amount of Each Receipt this Period

1000.00

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

2008.38

**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 41 / 120  
(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)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Emerson Electric Co. Responsible Government Fund

Mailing Address 8000 W. Florissant Ave

City State Zip Code  
Jennings MO 63136

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2007

**Transaction ID:** C13259572

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Barnes and Thornburg PAC

Mailing Address 11 S. Meridian Street

City State Zip Code  
Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2007

**Transaction ID:** C10567692

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
National Apartment Association PAC (NAA PAC)

Mailing Address 201 Union St  
Suite 200

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** C13307032

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

**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 42 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Independent Insurance Agents of America (INSURPAC)  
Mailing Address 412 First Street SE Suite 300

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307042

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Sheet Metal Workers Political Action League  
Mailing Address 1750 New York Avenue, N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: C12083522

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Nationwide Political Participation Committee  
Mailing Address One Nationwide Plaza

City State Zip Code  
Columbus OH 43215

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Transaction ID: C12083523

Amount of Each Receipt this Period  
1000.00

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

11000.00

**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 43 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
American Hospital Association PAC

Mailing Address 325 Seventh Street NW Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 1 | / | 2 | 0 | 0 | 7 |

Transaction ID: C13307033

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Bank of America Corporation State & Federal PAC

Mailing Address 1100 N King St

City State Zip Code  
Wilmington DE 19884-0011

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 5 | / | 2 | 0 | 0 | 7 |

Transaction ID: C13259563

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Gibson, Dunn & Crutcher LLP PAC

Mailing Address 333 South Grand Avenue  
44th Floor

City State Zip Code  
Los Angeles CA 90071

FEC ID number of contributing federal political committee. **C** C00344754

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 5 | / | 2 | 0 | 0 | 7 |

Transaction ID: C13259573

Amount of Each Receipt this Period

1000.00

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

4500.00

**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 44 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Qwest Communications International Inc. PAC

Mailing Address 607 14th Street NW  
905

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00237156

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307034

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
BINGHAM MCCUTCHEN LLP PAC

Mailing Address 2020 K Street NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00165621

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C13259564

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Community Financial Services Assoc. PAC (CFSA PAC)

Mailing Address 515 King St  
Ste 300

City State Zip Code  
Alexandria VA 22314-3137

FEC ID number of contributing federal political committee. **C** C00432534

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 0 7

Transaction ID: C14550055

Amount of Each Receipt this Period

2500.00

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

6000.00

**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 45 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Allstate Insurance Company PAC

Mailing Address 2775 Sanders Road  
Suite A5

City State Zip Code  
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C** C00040253

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C13307035

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Wal-Mart Stores Inc PAC For Responsible Government

Mailing Address 702 SW 8th Street

City State Zip Code  
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C13259575

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Tyson Foods, Inc. PAC (TYPAC)

Mailing Address PO Box 2020

City State Zip Code  
Springdale AR 72765

FEC ID number of contributing federal political committee. **C** C00169821

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 0 7

Transaction ID: C14550056

Amount of Each Receipt this Period

1000.00

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

7000.00

**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 46 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Barnes and Thornburg PAC  
Mailing Address 11 S. Meridian Street  
City Indianapolis State IN Zip Code 46204  
FEC ID number of contributing federal political committee. **C** C00395947  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 11 / 21 / 2007  
Transaction ID: C13307016  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
American Family Mutual Insurance Co. PAC  
Mailing Address 600 America Parkway  
City Madison State WI Zip Code 53783  
FEC ID number of contributing federal political committee. **C** C00354290  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 21 / 2007  
Transaction ID: C13307036  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Fleishman Hillard PAC (FH/GPC PAC)  
Mailing Address 200 N. Broadway  
City Saint Louis State MO Zip Code 63102  
FEC ID number of contributing federal political committee. **C** C00200659  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: C14548316  
Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 47 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Pfizer Inc. PAC

Mailing Address 325 7th Street NW  
Suite 1200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 2 / 2 0 0 7

**Transaction ID:** C14550057

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
NAMIC PAC

Mailing Address 3601 Vincennes Rd

City Indianapolis State IN Zip Code 46268-1154

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 1 / 2 0 0 7

**Transaction ID:** C13307017

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
New York Life Insurance Company PAC

Mailing Address 51 Madison Ave

City New York State NY Zip Code 10010-1603

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 1 / 2 0 0 7

**Transaction ID:** C13307027

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 120

(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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
National Assoc of Real Estate Investment Trust PAC

Mailing Address 1875 Eye Street NW  
Suite 600

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 1 | / | 2 | 0 | 0 | 7 |

Transaction ID: C13307037

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Federal Express PAC

Mailing Address 942 South Shady Grove Road

City State Zip Code  
Memphis TN 38120

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

Transaction ID: C14546897

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Federal National Mortgage Association PAC

Mailing Address 3900 Wisconsin Avenue, NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C** C00393520

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 7 | / | 2 | 0 | 0 | 7 |

Transaction ID: C10567698

Amount of Each Receipt this Period

1000.00

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

8000.00

**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 49 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
AM General Sales Corporation PAC

Mailing Address 105 N. Niles Avenue

City State Zip Code  
South Bend IN 46617

FEC ID number of contributing federal political committee. **C** C00282210

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2007

Transaction ID: C10596748

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
AON Corporation PAC

Mailing Address 200 East Randolph

City State Zip Code  
Chicago IL 60601

FEC ID number of contributing federal political committee. **C** C00211250

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 21 / 2007

Transaction ID: C13307028

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
AMGEN Inc. PAC

Mailing Address 555 13th Street NW  
#600W

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 21 / 2007

Transaction ID: C13307038

Amount of Each Receipt this Period

2500.00

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

12500.00

**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 50 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
PhRMA  
Mailing Address 1100 15th Street NW  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00021972  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 12 / 18 / 2007  
Transaction ID: C14546858  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Managed Funds Association (MFA-PAC)  
Mailing Address 2025 M Street NW  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00306894  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 05 / 2007  
Transaction ID: C13259568  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Deloitte & Touche Federal PAC  
Mailing Address PO Box 365  
City Washington State DC Zip Code 20044  
FEC ID number of contributing federal political committee. **C** C00211318  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 12 / 22 / 2007  
Transaction ID: C14550059  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00  
**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 51 / 120  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
National Association Of Health Underwriters PAC

Mailing Address P.O. Box 7135

City State Zip Code  
Washington DC 20044

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2007

**Transaction ID:** C10557509

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Federal National Mortgage Association PAC

Mailing Address 3900 Wisconsin Avenue, NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C** C00393520

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** C13307029

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Principal Life Insurance Company PAC (PRINPAC)

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50392

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** C13307039

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 52 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
United Transportation Union PAC (UTU PAC)  
Mailing Address 14600 Detroit Avenue

City State Zip Code  
Cleveland OH 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2007

**Transaction ID:** C13259569

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Prudential Financial Inc. PAC  
Mailing Address 751 Broad Street

City State Zip Code  
Harrisburg PA 17102

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 01 / 2007

**Transaction ID:** C14548239

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Washington Mutual PAC (WAMUPAC)  
Mailing Address 1301 Second Avenue 42nd Floor

City State Zip Code  
Seattle WA 98101

FEC ID number of contributing federal political committee. **C** C00129833

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

**Transaction ID:** C10555379

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**TOTAL** This Period (last page this line number only) ..... ► 102000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |                              |  |                             |                             |
|---|------------------------------|--|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |  | PAGE 53 / 120               |                             |
|   | (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 checked="" 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)  
All America PAC

A.

|  |                                      |  |
|--|--------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis |                                      | Date of Receipt  |
| Mailing Address 107 North Pennsylvania Street<br>Suite 700               |                                      | <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/> <input type="text" value="7"/> |
| City   | State                                | Zip Code   |
| Indianapolis   | IN                                   | 46204  |
| FEC ID number of contributing federal political committee.               |                                      | Transaction ID: C14550054  |
| <input type="text" value="C"/>   |                                      | Amount of Each Receipt this Period   |
|  |                                      | <input type="text" value="1180.22"/>   |
| Name of Employer   | Occupation                           | Rebate   |
|  |                                      |  |
| Receipt For:   | Aggregate Year-to-Date ▼             |  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General        | <input type="text" value="3691.28"/> |  |
| <input type="checkbox"/> Other (specify) ▼                               |                                      |  |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="1180.22"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="1180.22"/> |

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

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

FOR LINE NUMBER: PAGE 54 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City Indianapolis State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3691.28

Date of Receipt: 08 / 31 / 2007  
**Transaction ID:** C14549340  
 Amount of Each Receipt this Period: 0.01  
 \* Interest Income

**B.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City Indianapolis State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3691.28

Date of Receipt: 10 / 31 / 2007  
**Transaction ID:** C14549351  
 Amount of Each Receipt this Period: 58.31  
 \* Interest Income

**C.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City Indianapolis State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3691.28

Date of Receipt: 07 / 31 / 2007  
**Transaction ID:** C10596611  
 Amount of Each Receipt this Period: 164.68  
 \* Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► 223.00

**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 55 / 120

(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"/> 14  | <input type="checkbox"/> 15  | <input checked="" 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)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Raymond James & Associates

Mailing Address 880 Carillon Parkway

City State Zip Code  
Saint Petersburg FL 33716

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3741.09

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2007

Transaction ID: C14574391

Amount of Each Receipt this Period

228.13

\* Interest Income

**B.**

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3691.28

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2007

Transaction ID: C14548481

Amount of Each Receipt this Period

126.24

\* Interest Income

**C.**

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3691.28

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2007

Transaction ID: C10596612

Amount of Each Receipt this Period

67.38

\* Interest Income

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

421.75

**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 56 / 120

(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"/> 14  | <input type="checkbox"/> 15  | <input checked="" type="checkbox"/> 16 |

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3691.28

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2007

Transaction ID: C10596613

Amount of Each Receipt this Period

0.01

\* Interest Income

**B.**

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3691.28

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 30 / 2007

Transaction ID: C14549365

Amount of Each Receipt this Period

214.85

\* Interest Income

**C.**

Full Name (Last, First, Middle Initial)  
Raymond James & Associates

Mailing Address 880 Carillon Parkway

City State Zip Code  
Saint Petersburg FL 33716

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3741.09

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 30 / 2007

Transaction ID: C13259536

Amount of Each Receipt this Period

589.73

\* Interest Income

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

804.59

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |  |               |
|---|--|---------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 57 / 120 |
|   | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
All America PAC

|   |   |                                      |   |
|---|---|--------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Raymond James & Associates |                                      | Date of Receipt   |
|   | Mailing Address 880 Carillon Parkway                                  |                                      | <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2007"/> |
|   | City  | State                                | Zip Code  |
|   | Saint Petersburg  | FL                                   | 33716   |
|   | FEC ID number of contributing federal political committee. <b>C</b>   |                                      | Transaction ID: C14574396   |
| Name of Employer  |   | Occupation                           | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼             | <input type="text" value="534.23"/>   |
|   |   | <input type="text" value="3741.09"/> | * Interest Income   |

|   |   |                                      |   |
|---|---|--------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Raymond James & Associates |                                      | Date of Receipt   |
|   | Mailing Address 880 Carillon Parkway                                  |                                      | <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2007"/> |
|   | City  | State                                | Zip Code  |
|   | Saint Petersburg  | FL                                   | 33716   |
|   | FEC ID number of contributing federal political committee. <b>C</b>   |                                      | Transaction ID: C14548476   |
| Name of Employer  |   | Occupation                           | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼             | <input type="text" value="616.34"/>   |
|   |   | <input type="text" value="3741.09"/> | * Interest Income   |

|   |  |                                      |   |
|---|--|--------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis |                                      | Date of Receipt   |
|   | Mailing Address 107 North Pennsylvania Street<br>Suite 700               |                                      | <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2007"/> |
|   | City   | State                                | Zip Code  |
|   | Indianapolis   | IN                                   | 46204   |
|   | FEC ID number of contributing federal political committee. <b>C</b>      |                                      | Transaction ID: C14549337   |
| Name of Employer  |  | Occupation                           | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼             | <input type="text" value="4.86"/>   |
|   |  | <input type="text" value="3691.28"/> | * Interest Income   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="1155.43"/> |
| <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 58 / 120

(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"/> 14  | <input type="checkbox"/> 15  | <input checked="" type="checkbox"/> 16 |

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3691.28

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2007

Transaction ID: C14549347

Amount of Each Receipt this Period

67.58

\* Interest Income

**B.**

Full Name (Last, First, Middle Initial)  
Raymond James & Associates

Mailing Address 880 Carillon Parkway

City State Zip Code  
Saint Petersburg FL 33716

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3741.09

Date of Receipt

M M / D D / Y Y Y Y  
12 / 17 / 2007

Transaction ID: C14576477

Amount of Each Receipt this Period

655.28

\* Interest Income

**C.**

Full Name (Last, First, Middle Initial)  
Raymond James & Associates

Mailing Address 880 Carillon Parkway

City State Zip Code  
Saint Petersburg FL 33716

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3741.09

Date of Receipt

M M / D D / Y Y Y Y  
12 / 31 / 2007

Transaction ID: C14574397

Amount of Each Receipt this Period

579.86

\* Interest Income

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

1302.72

**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 59 / 120  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Raymond James & Associates

Mailing Address 880 Carillon Parkway

City State Zip Code  
Saint Petersburg FL 33716

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3741.09

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 8 / 2 0 0 7

**Transaction ID:** C13259537

Amount of Each Receipt this Period  
537.52

\* Interest Income

**B.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3691.28

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 7

**Transaction ID:** C14548477

Amount of Each Receipt this Period  
109.12

\* Interest Income

**C.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3691.28

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 7

**Transaction ID:** C14561818

Amount of Each Receipt this Period  
17.46

\* Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► **664.10**

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

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

|   |                              |  |
|---|------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 60 / 120                          |
|   | (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"/> 14            |
| <input type="checkbox"/> 15   | <input type="checkbox"/> 16  | <input checked="" 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)  
All America PAC

|   |  |             |   |
|---|--|-------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis |             | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2007 |
|   | Mailing Address 107 North Pennsylvania Street<br>Suite 700               |             | <b>Transaction ID:</b> C14548478                    |
|   | City<br>Indianapolis   | State<br>IN | Zip Code<br>46204                                   |
|   | FEC ID number of contributing federal political committee.<br>C          |             | Amount of Each Receipt this Period<br>142.30        |
|   | Name of Employer   | Occupation  | * Interest Income                                   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3691.28                                      |             |   |

|   |  |             |   |
|---|--|-------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis |             | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2007 |
|   | Mailing Address 107 North Pennsylvania Street<br>Suite 700               |             | <b>Transaction ID:</b> C14549349                    |
|   | City<br>Indianapolis   | State<br>IN | Zip Code<br>46204                                   |
|   | FEC ID number of contributing federal political committee.<br>C          |             | Amount of Each Receipt this Period<br>62.17         |
|   | Name of Employer   | Occupation  | * Interest Income                                   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3691.28                                      |             |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 204.47  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 4776.06 |

# 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)  
All America PAC

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>NGP Software, Inc.</p> <p>Mailing Address 1225 Eye Street NW<br/>Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Database Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> D236320</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2250.00"/></p>  |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>NGP Software, Inc.</p> <p>Mailing Address 1225 Eye Street NW<br/>Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Database Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> D279480</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2250.00"/></p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Nancy Jacobson Consulting, Inc.</p> <p>Mailing Address 1070 Thomas Jefferson Steet, N.W.<br/>Suite 202</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D279490</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15000.00"/></p> |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="19500.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                  |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D279720<br>Date of Disbursement<br>08 / 31 / 2007   |
|    | Mailing Address 107 North Pennsylvania Street<br>Suite 700   | Amount of Each Disbursement this Period<br>12.00  |
|    | City Indianapolis State IN Zip Code 46204  |   |
|    | Purpose of Disbursement Bank Fee   | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Merchant Solutions  | Transaction ID: D279760<br>Date of Disbursement<br>10 / 02 / 2007   |
|    | Mailing Address HC1 Box 1A392  | Amount of Each Disbursement this Period<br>74.00  |
|    | City Lackawaxen State PA Zip Code 18435  |   |
|    | Purpose of Disbursement Credit Card Processing Fee   | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>AT&T  | Transaction ID: D279920<br>Date of Disbursement<br>12 / 19 / 2007   |
|    | Mailing Address P.O. Box 660011  | Amount of Each Disbursement this Period<br>97.95  |
|    | City Dallas State TX Zip Code 75266  |   |
|    | Purpose of Disbursement Telephone  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>183.95</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
CT Corporation

Transaction ID: D205130  
Date of Disbursement

Mailing Address PO Box 4349

/   /

City State Zip Code  
Carol Stream IL 60197

Amount of Each Disbursement this Period

Purpose of Disbursement  
Registered Agent Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Authnet Gateway

Transaction ID: D282740  
Date of Disbursement

Mailing Address 915 South 500 East Suite 200

/   /

City State Zip Code  
American Fork UT 84003

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Nancy Jacobson Consulting, Inc.

Transaction ID: D236321  
Date of Disbursement

Mailing Address 1070 Thomas Jefferson Steet, N.W.  
Suite 202

/   /

City State Zip Code  
Washington DC 20007

Amount of Each Disbursement this Period

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

**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 |

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Nancy Jacobson Consulting, Inc.

Mailing Address 1070 Thomas Jefferson Steet, N.W.  
Suite 202

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D279491

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

15000.00

**B.** Full Name (Last, First, Middle Initial)  
Sarah R Rozensky

Mailing Address PO Box 5520

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D279501

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

858.40

**C.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D279721

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

12.00

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

15870.40

**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 65 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D279831<br>Date of Disbursement<br>11 / 30 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street<br>Suite 700   | Amount of Each Disbursement this Period<br>18.00   |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement Bank Fee   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D279921<br>Date of Disbursement<br>12 / 19 / 2007  |
|    | Mailing Address P.O. Box 1140  | Amount of Each Disbursement this Period<br>30.27   |
|    | City Memphis State TN Zip Code 38101   |  |
|    | Purpose of Disbursement Shipping   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D281271<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address P.O. Box 1140  | Amount of Each Disbursement this Period<br>13.69   |
|    | City Memphis State TN Zip Code 38101   |  |
|    | Purpose of Disbursement Shipping   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 61.96 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |       |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D207391<br>Date of Disbursement<br>08 / 22 / 2007  |
|    | Mailing Address PO Box 5520  | Amount of Each Disbursement this Period<br>359.78  |
|    | City Washington State DC Zip Code 20016  |  |
|    | Purpose of Disbursement Reimbursement of Office Expenses<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Authnet Gateway   | Transaction ID: D282741<br>Date of Disbursement<br>07 / 03 / 2007  |
|    | Mailing Address 915 South 500 East Suite 200   | Amount of Each Disbursement this Period<br>25.20   |
|    | City American Fork State UT Zip Code 84003   |  |
|    | Purpose of Disbursement Credit Card Processing Fee<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D236302<br>Date of Disbursement<br>09 / 04 / 2007  |
|    | Mailing Address PO Box 5520  | Amount of Each Disbursement this Period<br>851.17  |
|    | City Washington State DC Zip Code 20016  |  |
|    | Purpose of Disbursement Payroll<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 1236.15 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>DCS Campaign, LLC   | Transaction ID: D236322<br>Date of Disbursement<br>08 / 22 / 2007 |
|    | Mailing Address 600 Pennsylvania Ave NW  | Amount of Each Disbursement this Period<br>500.00                 |
|    | City Washington State DC Zip Code 20003  |   |
|    | Purpose of Disbursement<br>Email Services  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Van Scoyoc Associates   | Transaction ID: D279472<br>Date of Disbursement<br>11 / 29 / 2007 |
|    | Mailing Address 101 Constitution Avenue, Suite 600   | Amount of Each Disbursement this Period<br>84.84                  |
|    | City Washington State DC Zip Code 20001  |   |
|    | Purpose of Disbursement<br>Telephone   | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Authnet Gateway   | Transaction ID: D279722<br>Date of Disbursement<br>08 / 02 / 2007 |
|    | Mailing Address 915 South 500 East Suite 200   | Amount of Each Disbursement this Period<br>25.90                  |
|    | City American Fork State UT Zip Code 84003   |   |
|    | Purpose of Disbursement<br>Credit Card Processing Fee  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 610.74 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D279752  |
|    | Mailing Address PO Box 5520  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 01 / 2007   |
|    | City Washington State DC Zip Code 20016  | Amount of Each Disbursement this Period<br>1286.56   |
|    | Purpose of Disbursement Payroll  | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Merchant Solutions  | Transaction ID: D279762  |
|    | Mailing Address HC1 Box 1A392  | Date of Disbursement<br>MM / DD / YYYY<br>11 / 02 / 2007   |
|    | City Lackawaxen State PA Zip Code 18435  | Amount of Each Disbursement this Period<br>74.00   |
|    | Purpose of Disbursement Credit Card Processing Fee   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Brandi Bruns  | Transaction ID: D207392  |
|    | Mailing Address 6136 Burlington Avenue   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 22 / 2007   |
|    | City Indianapolis State IN Zip Code 46220  | Amount of Each Disbursement this Period<br>260.00  |
|    | Purpose of Disbursement Fundraising Consulting Fee   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 1620.56 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Merchant Solutions  | Transaction ID: D282742<br>Date of Disbursement<br>12 / 03 / 2007  |
|    | Mailing Address HC1 Box 1A392  | Amount of Each Disbursement this Period<br>74.00   |
|    | City Lackawaxen State PA Zip Code 18435  |  |
|    | Purpose of Disbursement<br>Credit Card Processing Fee  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Stefanie Freeman  | Transaction ID: D279492<br>Date of Disbursement<br>10 / 26 / 2007  |
|    | Mailing Address 2120 16th Street, NW Apt. 311  | Amount of Each Disbursement this Period<br>40.00   |
|    | City Washington State DC Zip Code 20009  |  |
|    | Purpose of Disbursement<br>Reimbursement - Travel  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>American Patriot Group, LLC   | Transaction ID: D283452<br>Date of Disbursement<br>07 / 20 / 2007   |
|    | Mailing Address PO Box 5669  | Amount of Each Disbursement this Period<br>1464.80  |
|    | City Evansville State IN Zip Code 47716-5669   |   |
|    | Purpose of Disbursement<br>Travel  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 1578.80 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|   |  |
|---|--|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Van Scoyoc Associates</p> <p>Mailing Address 101 Constitution Avenue, Suite 600</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Room Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> D279473</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>DCS Campaign, LLC</p> <p>Mailing Address 600 Pennsylvania Ave NW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Email Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                 | <p><b>Transaction ID:</b> D279483</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Nancy Jacobson</p> <p>Mailing Address 1070 Thomas Jefferson St NW</p> <p>City Washington State DC Zip Code 20007-3824</p> <p>Purpose of Disbursement Reimbursement - Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D279493</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="84.29"/></p>  |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="884.29"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D279503  |
|    | Mailing Address 3060 Williams Drive  | Date of Disbursement<br>11 / 30 / 2007   |
|    | City Fairfax State VA Zip Code 22031   | Amount of Each Disbursement this Period<br>264.22  |
|    | Purpose of Disbursement<br>Payroll Taxes   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Merchant Solutions  | Transaction ID: D279723  |
|    | Mailing Address HC1 Box 1A392  | Date of Disbursement<br>08 / 02 / 2007   |
|    | City Lackawaxen State PA Zip Code 18435  | Amount of Each Disbursement this Period<br>261.55  |
|    | Purpose of Disbursement<br>Credit Card Processing Fee  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D279753  |
|    | Mailing Address 3060 Williams Drive  | Date of Disbursement<br>11 / 01 / 2007   |
|    | City Fairfax State VA Zip Code 22031   | Amount of Each Disbursement this Period<br>458.50  |
|    | Purpose of Disbursement<br>Payroll Taxes   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 984.27 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Merchant Solutions  | Transaction ID: D279763  |
|    | Mailing Address HC1 Box 1A392  | Date of Disbursement<br>09 / 04 / 2007   |
|    | City Lackawaxen State PA Zip Code 18435  | Amount of Each Disbursement this Period<br>119.45  |
|    | Purpose of Disbursement<br>Credit Card Processing Fee  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>DCS Campaign, LLC   | Transaction ID: D279923  |
|    | Mailing Address 600 Pennsylvania Ave NW  | Date of Disbursement<br>12 / 19 / 2007   |
|    | City Washington State DC Zip Code 20003  | Amount of Each Disbursement this Period<br>1000.00   |
|    | Purpose of Disbursement<br>Email Services  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Brandi Bruns  | Transaction ID: D205133  |
|    | Mailing Address 6136 Burlington Avenue   | Date of Disbursement<br>08 / 08 / 2007   |
|    | City Indianapolis State IN Zip Code 46220  | Amount of Each Disbursement this Period<br>230.95  |
|    | Purpose of Disbursement<br>Reimbursement - Shipping/Printing   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 1350.40 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>B & D Sagamore PAC<br>Mailing Address 300 N Meridian St Ste 2700<br>City Indianapolis State IN Zip Code 46204-1750<br>Purpose of Disbursement Catering<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Transaction ID: D286163<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 7 |
|  | Amount of Each Disbursement this Period<br>508.38<br>* in-kind received                       |

|  |   |
|--|---|
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Perkins Coie LLP<br>Mailing Address 1201 Third Avenue 40th Floor<br>City Seattle State WA Zip Code 98101-3099<br>Purpose of Disbursement Legal & Accounting Services<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Transaction ID: D207393<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 2 2 / 2 0 0 7 |
|  | Amount of Each Disbursement this Period<br>3764.90  |

|   |   |
|---|---|
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>DCS Campaign, LLC<br>Mailing Address 600 Pennsylvania Ave NW<br>City Washington State DC Zip Code 20003<br>Purpose of Disbursement Website & Email Services<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Transaction ID: D282743<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 3 0 / 2 0 0 7 |
|   | Amount of Each Disbursement this Period<br>2200.00  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 6473.28 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]     |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.**

Full Name (Last, First, Middle Initial)  
Van Scoyoc Associates

Mailing Address 101 Constitution Avenue, Suite 600

City Washington State DC Zip Code 20001

Purpose of Disbursement Telephone  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D279474  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
Perkins Coie LLP

Mailing Address 1201 Third Avenue  
40th Floor

City Seattle State WA Zip Code 98101-3099

Purpose of Disbursement  
Legal & Accounting Services  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D279484  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
Merchant Solutions

Mailing Address HC1 Box 1A392

City Lackawaxen State PA Zip Code 18435

Purpose of Disbursement  
Credit Card Processing Fee  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D205134  
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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D282304  |
|    | Mailing Address 3060 Williams Drive  | Date of Disbursement<br>12 / 31 / 2007   |
|    | City Fairfax State VA Zip Code 22031   | Amount of Each Disbursement this Period<br>86.96   |
|    | Purpose of Disbursement<br>Payroll Services  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Perkins Coie LLP  | Transaction ID: D282734  |
|    | Mailing Address 1201 Third Avenue 40th Floor   | Date of Disbursement<br>08 / 06 / 2007   |
|    | City Seattle State WA Zip Code 98101-3099  | Amount of Each Disbursement this Period<br>3535.86   |
|    | Purpose of Disbursement<br>Legal & Accounting Services   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D236305  |
|    | Mailing Address 3060 Williams Drive  | Date of Disbursement<br>09 / 04 / 2007   |
|    | City Fairfax State VA Zip Code 22031   | Amount of Each Disbursement this Period<br>260.33  |
|    | Purpose of Disbursement<br>Payroll Taxes   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>3883.15</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Van Scoyoc Associates</p> <p>Mailing Address 101 Constitution Avenue, Suite 600</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Room Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D279475</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="470.99"/></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City Memphis State TN Zip Code 38101</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                                  | <p><b>Transaction ID:</b> D279485</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.74"/></p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Sarah R Rozensky</p> <p>Mailing Address PO Box 5520</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Reimbursement - Postal Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>              | <p><b>Transaction ID:</b> D279925</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="86.00"/></p>  |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="580.73"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

# 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 77 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Elizabeth A. Swickard<br><br>Mailing Address 12026 White Cord Way<br><br>City Columbia State MD Zip Code 21044<br><br>Purpose of Disbursement<br>Void of 12/06 Disbursement<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 | Transaction ID: D205135<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 0 3 / 2 0 0 7<br><br>Amount of Each Disbursement this Period<br>-820.72 |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis<br><br>Mailing Address 107 North Pennsylvania Street<br>Suite 700<br><br>City Indianapolis State IN Zip Code 46204<br><br>Purpose of Disbursement<br>Bank Fee<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D282735<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 1 3 / 2 0 0 7<br><br>Amount of Each Disbursement this Period<br>100.00  |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Authnet Gateway<br><br>Mailing Address 915 South 500 East Suite 200<br><br>City American Fork State UT Zip Code 84003<br><br>Purpose of Disbursement<br>Credit Card Processing Fee<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼          | Transaction ID: D279755<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 2 / 2 0 0 7<br><br>Amount of Each Disbursement this Period<br>25.00   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | -695.72 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Paychex</p> <p>Mailing Address 3060 Williams Drive</p> <p>City State Zip Code<br/>Fairfax VA 22031</p> <p>Purpose of Disbursement<br/>Payroll Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D236306<br/><b>Date of Disbursement</b><br/>10 / 10 / 2007</p> <p>Amount of Each Disbursement this Period<br/>337.39</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City State Zip Code<br/>Memphis TN 38101</p> <p>Purpose of Disbursement<br/>Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>       | <p><b>Transaction ID:</b> D279486<br/><b>Date of Disbursement</b><br/>11 / 30 / 2007</p> <p>Amount of Each Disbursement this Period<br/>29.57</p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Paychex</p> <p>Mailing Address 3060 Williams Drive</p> <p>City State Zip Code<br/>Fairfax VA 22031</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>    | <p><b>Transaction ID:</b> D279806<br/><b>Date of Disbursement</b><br/>10 / 31 / 2007</p> <p>Amount of Each Disbursement this Period<br/>8.57</p>   |

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

375.53

**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 |

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D279926<br>Date of Disbursement<br>12 / 20 / 2007  |
|    | Mailing Address PO Box 5520  | Amount of Each Disbursement this Period<br>47.24   |
|    | City Washington State DC Zip Code 20016  |  |
|    | Purpose of Disbursement Reimbursement - Office Supplies  | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D205136<br>Date of Disbursement<br>07 / 03 / 2007  |
|    | Mailing Address 3060 Williams Drive  | Amount of Each Disbursement this Period<br>808.22  |
|    | City Fairfax State VA Zip Code 22031   |  |
|    | Purpose of Disbursement Payroll Services   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281076<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>148.04  |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Travel   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 1003.50 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D282736<br>Date of Disbursement<br>12 / 11 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street<br>Suite 700   | Amount of Each Disbursement this Period<br>25.00   |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement Bank Fee   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Lockton Companies Inc.  | Transaction ID: D282746<br>Date of Disbursement<br>08 / 06 / 2007  |
|    | Mailing Address 901 15th Street, NW<br>Suite 650   | Amount of Each Disbursement this Period<br>1.04  |
|    | City Washington State DC Zip Code 20005  |  |
|    | Purpose of Disbursement Insurance  | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D236317<br>Date of Disbursement<br>09 / 28 / 2007  |
|    | Mailing Address PO Box 5520  | Amount of Each Disbursement this Period<br>472.45  |
|    | City Washington State DC Zip Code 20016  |  |
|    | Purpose of Disbursement Payroll  | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 498.49 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |        |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>AT&T  | Transaction ID: D279487<br>Date of Disbursement<br>10 / 19 / 2007  |
|    | Mailing Address P.O. Box 660011  | Amount of Each Disbursement this Period<br>113.94  |
|    | City Dallas State TX Zip Code 75266  |  |
|    | Purpose of Disbursement Telephone<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Electronic Transaction Systems (ETS)  | Transaction ID: D279537<br>Date of Disbursement<br>11 / 30 / 2007  |
|    | Mailing Address 10 Pidgeon Hill Drive  | Amount of Each Disbursement this Period<br>294.70  |
|    | City Sterling State VA Zip Code 20165  |  |
|    | Purpose of Disbursement Credit Card Processing Fees<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Authnet Gateway   | Transaction ID: D279757<br>Date of Disbursement<br>10 / 02 / 2007  |
|    | Mailing Address 915 South 500 East Suite 200   | Amount of Each Disbursement this Period<br>25.00   |
|    | City American Fork State UT Zip Code 84003   |  |
|    | Purpose of Disbursement Credit Card Processing Fee<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 433.64 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |        |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |   |
|--|---|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Sarah R Rozensky</p> <p>Mailing Address PO Box 5520</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement<br/>Reimbursement - Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>       | <p><b>Transaction ID:</b> D279927</p> <p>Date of Disbursement<br/>11 / 30 / 2007</p> <p>Amount of Each Disbursement this Period<br/>59.99</p>   |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Greenberg Traurig, P.A.</p> <p>Mailing Address 1221 Brickell Avenue</p> <p>City Miami State FL Zip Code 33131</p> <p>Purpose of Disbursement<br/>Catering &amp; Room Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D204607</p> <p>Date of Disbursement<br/>07 / 19 / 2007</p> <p>Amount of Each Disbursement this Period<br/>560.00</p>  |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Sarah R Rozensky</p> <p>Mailing Address PO Box 5520</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement<br/>Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                               | <p><b>Transaction ID:</b> D281267</p> <p>Date of Disbursement<br/>12 / 27 / 2007</p> <p>Amount of Each Disbursement this Period<br/>1186.51</p> |

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

1806.50

**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 |

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
Vectren Corporation Employees Federal PAC

Transaction ID: D282717

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 4 | / | 2 | 0 | 0 | 7 |

Mailing Address One Vectren Square

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

City State Zip Code  
Evansville IN 47708

Purpose of Disbursement  
Catering/Event Tickets

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

\* in-kind received

State: District:

B.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D282737

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 8 | / | 2 | 0 | 0 | 7 |

Mailing Address 107 North Pennsylvania Street  
Suite 700

Amount of Each Disbursement this Period

|       |
|-------|
| 18.00 |
|-------|

City State Zip Code  
Indianapolis IN 46204

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Sarah R Rozensky

Transaction ID: D279477

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Mailing Address PO Box 5520

Amount of Each Disbursement this Period

|       |
|-------|
| 47.50 |
|-------|

City State Zip Code  
Washington DC 20016

Purpose of Disbursement  
Reimbursement - Travel & Postage

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

|         |
|---------|
| 5065.50 |
|---------|

**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 84 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>American Express<br>Mailing Address Suite 0001<br>City Chicago State IL Zip Code 60601<br>Purpose of Disbursement<br>Credit Card Processing Fees<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D282747<br>Date of Disbursement<br>07 / 25 / 2007 |
|  | Amount of Each Disbursement this Period<br>196.96                 |
|  | Category/<br>Type   |
|  | Category/<br>Type   |

|  |   |
|--|---|
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Paychex<br>Mailing Address 3060 Williams Drive<br>City Fairfax State VA Zip Code 22031<br>Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D236318<br>Date of Disbursement<br>09 / 28 / 2007 |
|  | Amount of Each Disbursement this Period<br>116.65                 |
|  | Category/<br>Type   |
|  | Category/<br>Type   |

|   |   |
|---|---|
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Thomas Sugar<br>Mailing Address 4483 Thicket Trace<br>City Zionsville State IN Zip Code 46077<br>Purpose of Disbursement<br>Payroll<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D236298<br>Date of Disbursement<br>09 / 06 / 2007 |
|   | Amount of Each Disbursement this Period<br>2200.06                |
|   | Category/<br>Type   |
|   | Category/<br>Type   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2513.67 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]     |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D279478<br>Date of Disbursement<br>10 / 19 / 2007  |
|    | Mailing Address PO Box 5520  | Amount of Each Disbursement this Period<br>176.40  |
|    | City Washington State DC Zip Code 20016  |  |
|    | Purpose of Disbursement Reimbursement - Postal Fee   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>AT&T  | Transaction ID: D279488<br>Date of Disbursement<br>11 / 11 / 2007  |
|    | Mailing Address P.O. Box 660011  | Amount of Each Disbursement this Period<br>97.95   |
|    | City Dallas State TX Zip Code 75266  |  |
|    | Purpose of Disbursement Telephone  |  |
|    | Candidate Name   | 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:   |  |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Postmaster  | Transaction ID: D279498<br>Date of Disbursement<br>12 / 11 / 2007  |
|    | Mailing Address PO Box 92200   | Amount of Each Disbursement this Period<br>4998.67   |
|    | City Washington State DC Zip Code 20090  |  |
|    | Purpose of Disbursement Postage  |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 5273.02 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Electronic Transaction Systems (ETS)

Mailing Address 10 Pidgeon Hill Drive

City Sterling State VA Zip Code 20165

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D279538

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

328.92

**B.** Full Name (Last, First, Middle Initial)  
Nancy Jacobson

Mailing Address 1070 Thomas Jefferson St NW

City Washington State DC Zip Code 20007-3824

Purpose of Disbursement  
Reimbursement - Telephone, Shipping

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D204618

Date of Disbursement

07 / 09 / 2007

Amount of Each Disbursement this Period

125.53

**C.** Full Name (Last, First, Middle Initial)  
Authnet Gateway

Mailing Address 915 South 500 East Suite 200

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D279758

Date of Disbursement

09 / 02 / 2007

Amount of Each Disbursement this Period

25.20

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

479.65

**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 |

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D279768<br>Date of Disbursement<br>11 / 13 / 2007  |
|    | Mailing Address 3060 Williams Drive  | Amount of Each Disbursement this Period<br>117.95  |
|    | City Fairfax State VA Zip Code 22031   |  |
|    | Purpose of Disbursement<br>Payroll Services  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Nancy Jacobson  | Transaction ID: D205128<br>Date of Disbursement<br>08 / 08 / 2007  |
|    | Mailing Address 1070 Thomas Jefferson St NW  | Amount of Each Disbursement this Period<br>30.34   |
|    | City Washington State DC Zip Code 20007-3824   |  |
|    | Purpose of Disbursement<br>Reimbursement - Telephone, Shipping   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D281268<br>Date of Disbursement<br>12 / 28 / 2007  |
|    | Mailing Address 3060 Williams Drive  | Amount of Each Disbursement this Period<br>414.05  |
|    | City Fairfax State VA Zip Code 22031   |  |
|    | Purpose of Disbursement<br>Payroll Taxes   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>562.34</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Adam M. Aron  | Transaction ID: D282718<br>Date of Disbursement<br>11 / 20 / 2007  |
|    | Mailing Address 1331 Brickell Bay Dr   | Amount of Each Disbursement this Period<br>1101.00   |
|    | City Miami State FL Zip Code 33131-3690  |  |
|    | Purpose of Disbursement Catering   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | * in-kind received   |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Stefanie Freeman  | Transaction ID: D203669<br>Date of Disbursement<br>07 / 09 / 2007  |
|    | Mailing Address 2120 16th Street, NW Apt. 311  | Amount of Each Disbursement this Period<br>118.40  |
|    | City Washington State DC Zip Code 20009  |  |
|    | Purpose of Disbursement Reimbursement - Travel & Postage   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Paychex   | Transaction ID: D236299<br>Date of Disbursement<br>09 / 06 / 2007  |
|    | Mailing Address 3060 Williams Drive  | Amount of Each Disbursement this Period<br>766.67  |
|    | City Fairfax State VA Zip Code 22031   |  |
|    | Purpose of Disbursement Payroll Taxes  |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 1986.07 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Sarah R Rozensky  | Transaction ID: D279479<br>Date of Disbursement<br>10 / 28 / 2007  |
|    | Mailing Address PO Box 5520  | Amount of Each Disbursement this Period<br>187.61  |
|    | City Washington State DC Zip Code 20016  |  |
|    | Purpose of Disbursement Reimbursement - Travel & Office Supplies   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Nancy Jacobson Consulting, Inc.                                       | Transaction ID: D279489<br>Date of Disbursement<br>12 / 01 / 2007  |
|    | Mailing Address 1070 Thomas Jefferson Steet, N.W. Suite 202  | Amount of Each Disbursement this Period<br>15000.00  |
|    | City Washington State DC Zip Code 20007  |  |
|    | Purpose of Disbursement Fundraising Consulting Services  |  |
|    | Candidate Name   | 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:   |  |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Electronic Transaction Systems (ETS)                                  | Transaction ID: D279769<br>Date of Disbursement<br>10 / 02 / 2007  |
|    | Mailing Address 10 Pidgeon Hill Drive  | Amount of Each Disbursement this Period<br>7.83  |
|    | City Sterling State VA Zip Code 20165  |  |
|    | Purpose of Disbursement Credit Card Processing Fees  |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 15195.44 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |          |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 90 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>David Rozmanich</p> <p>Mailing Address 23 Gleneagles Drive</p> <p>City Schererville State IN Zip Code 46375</p> <p>Purpose of Disbursement Reimbursement - Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> D279919</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="354.01"/></p>   |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Vectren Corporation</p> <p>Mailing Address One Vectren Square</p> <p>City Evansville State IN Zip Code 47708</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>   | <p><b>Transaction ID:</b> D279929</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="815.04"/></p>   |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Nancy Jacobson Consulting, Inc.</p> <p>Mailing Address 1070 Thomas Jefferson Steet, N.W. Suite 202</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D205129</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15000.00"/></p> |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="16169.05"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                  |

# 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 91 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|   |   |
|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Paychex<br>Mailing Address 3060 Williams Drive<br>City Fairfax State VA Zip Code 22031<br>Purpose of Disbursement<br>Payroll Services<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D281269<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 1 0 / 2 0 0 7 |
|   | Amount of Each Disbursement this Period<br>86.96  |
|   | Category/<br>Type   |
|   | [Empty Box]   |

|  |   |
|--|---|
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis<br>Mailing Address 107 North Pennsylvania Street Suite 700<br>City Indianapolis State IN Zip Code 46204<br>Purpose of Disbursement<br>Credit Card Payment, See Below<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D279724<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 2 0 / 2 0 0 7 |
|  | Amount of Each Disbursement this Period<br>2494.87  |
|  | Category/<br>Type   |
|  | [Empty Box]   |

|  |   |
|--|---|
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>R Bistro<br>Mailing Address 888 Massachusetts Ave<br>City Indianapolis State IN Zip Code 46204-1633<br>Purpose of Disbursement<br>Catering<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D279850<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 2 0 / 2 0 0 7 |
|  | Amount of Each Disbursement this Period<br>2460.00  |
|  | Category/<br>Type   |
|  | [MEMO ITEM]   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 2581.83     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [Empty Box] |

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

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

FOR LINE NUMBER: (check only one)

PAGE 92 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D279851<br>Date of Disbursement  |
|    | Mailing Address P.O. Box 1140  | <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>                          |
|    | City Memphis State TN Zip Code 38101   | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement Shipping   | <input type="text" value="23.27"/>   |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | [MEMO ITEM]  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D279852<br>Date of Disbursement  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>                          |
|    | City Indianapolis State IN Zip Code 46204  | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement Bank Fee   | <input type="text" value="0.26"/>  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | [MEMO ITEM]  |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D279853<br>Date of Disbursement  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>                          |
|    | City Indianapolis State IN Zip Code 46204  | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement Bank Fee   | <input type="text" value="1.34"/>  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>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) .....

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 93 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D279725

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 107 North Pennsylvania Street  
Suite 700

Amount of Each Disbursement this Period

|         |
|---------|
| 1193.60 |
|---------|

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Credit Card Payment, See Below

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Federal Express

Transaction ID: D279932

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address P.O. Box 1140

Amount of Each Disbursement this Period

|       |
|-------|
| 39.95 |
|-------|

City Memphis State TN Zip Code 38101

Purpose of Disbursement  
Shipping

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Monocle

Transaction ID: D279933

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 107 D Street, NE

Amount of Each Disbursement this Period

|        |
|--------|
| 151.45 |
|--------|

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Meal

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

|         |
|---------|
| 1193.60 |
|---------|

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 94 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Northwest Airlines<br>Mailing Address 901 15th Street, NW<br>City Washington State DC Zip Code 20005<br>Purpose of Disbursement Travel<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D279934<br>Date of Disbursement<br>08 / 21 / 2007 |
|  | Amount of Each Disbursement this Period<br>404.40<br>[MEMO ITEM]  |

|   |   |
|---|---|
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis<br>Mailing Address 107 North Pennsylvania Street Suite 700<br>City Indianapolis State IN Zip Code 46204<br>Purpose of Disbursement Bank Fee<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D281224<br>Date of Disbursement<br>08 / 21 / 2007 |
|   | Amount of Each Disbursement this Period<br>12.71<br>[MEMO ITEM]   |

|  |   |
|--|---|
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Carroll Travel<br>Mailing Address 201 Massachusetts Avenue, NE<br>City Washington State DC Zip Code 20002<br>Purpose of Disbursement Agent Fee<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D279935<br>Date of Disbursement<br>08 / 21 / 2007 |
|  | Amount of Each Disbursement this Period<br>30.00<br>[MEMO ITEM]   |

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281225<br>Date of Disbursement<br>08 / 21 / 2007 |
|    | Mailing Address 107 North Pennsylvania Street<br>Suite 700   | Amount of Each Disbursement this Period<br>35.26                  |
|    | City Indianapolis State IN Zip Code 46204  |   |
|    | Purpose of Disbursement Bank Fee   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>US Airways  | Transaction ID: D279936<br>Date of Disbursement<br>08 / 21 / 2007 |
|    | Mailing Address One Aviation Circle  | Amount of Each Disbursement this Period<br>404.40                 |
|    | City Washington State DC Zip Code 20001  |   |
|    | Purpose of Disbursement Travel   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Capital Grille  | Transaction ID: D281228<br>Date of Disbursement<br>08 / 21 / 2007 |
|    | Mailing Address 601 Pennsylvania Avenue, NW  | Amount of Each Disbursement this Period<br>105.75                 |
|    | City Washington State DC Zip Code 20004  |   |
|    | Purpose of Disbursement Meals  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D279736

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 7 |   |

Mailing Address 107 North Pennsylvania Street  
Suite 700

Amount of Each Disbursement this Period

|         |
|---------|
| 1156.96 |
|---------|

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Credit Card Payment, See Below

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Carroll Travel

Transaction ID: D281170

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 7 |   |

Mailing Address 201 Massachusetts Avenue, NE

Amount of Each Disbursement this Period

|       |
|-------|
| 30.00 |
|-------|

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Agent Fee

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Carroll Travel

Transaction ID: D281172

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 7 |   |

Mailing Address 201 Massachusetts Avenue, NE

Amount of Each Disbursement this Period

|       |
|-------|
| 30.00 |
|-------|

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Agent Fee

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

|         |
|---------|
| 1156.96 |
|---------|

**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 |

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281173<br>Date of Disbursement<br>11 / 21 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Agent Fee<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281184<br>Date of Disbursement<br>11 / 21 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>3.14  |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement Bank Fee<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281194<br>Date of Disbursement<br>11 / 21 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>10.00   |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement Bank Fee<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>US Airways  | Transaction ID: D281174<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address One Aviation Circle  | Amount of Each Disbursement this Period<br>648.80                 |
|    | City Washington State DC Zip Code 20001  |   |
|    | Purpose of Disbursement Travel   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281186<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>16.98                  |
|    | City Indianapolis State IN Zip Code 46204  |   |
|    | Purpose of Disbursement Bank Fee   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Transamerica Limo   | Transaction ID: D281177<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address 164 Westervelt Place   | Amount of Each Disbursement this Period<br>586.00                 |
|    | City Lodi State NJ Zip Code 07644  |   |
|    | Purpose of Disbursement Travel   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281168<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00                  |
|    | City Washington State DC Zip Code 20002  |   |
|    | Purpose of Disbursement Agent Fee  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Transamerica Limo   | Transaction ID: D281178<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address 164 Westervelt Place   | Amount of Each Disbursement this Period<br>465.00                 |
|    | City Lodi State NJ Zip Code 07644  |   |
|    | Purpose of Disbursement Travel   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D279737<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>449.77                 |
|    | City Indianapolis State IN Zip Code 46204  |   |
|    | Purpose of Disbursement Credit Card Payment, See Below   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 449.77 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |        |

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

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

FOR LINE NUMBER: (check only one)

PAGE 100 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281270<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address 107 North Pennsylvania Street<br>Suite 700   | Amount of Each Disbursement this Period<br>35.00                  |
|    | City Indianapolis State IN Zip Code 46204  |   |
|    | Purpose of Disbursement Bank Fee   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D279883<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address P.O. Box 1140  | Amount of Each Disbursement this Period<br>20.98                  |
|    | City Memphis State TN Zip Code 38101   |   |
|    | Purpose of Disbursement Shipping   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D279884<br>Date of Disbursement<br>11 / 21 / 2007 |
|    | Mailing Address P.O. Box 1140  | Amount of Each Disbursement this Period<br>26.20                  |
|    | City Memphis State TN Zip Code 38101   |   |
|    | Purpose of Disbursement Shipping   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼       |   |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|   |  |
|---|--|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City Memphis State TN Zip Code 38101</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> D279885</p> <p>Date of Disbursement<br/>11 / 21 / 2007</p> <p>Amount of Each Disbursement this Period<br/>23.71</p> <p>[MEMO ITEM]</p> |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City Memphis State TN Zip Code 38101</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> D279886</p> <p>Date of Disbursement<br/>11 / 21 / 2007</p> <p>Amount of Each Disbursement this Period<br/>37.85</p> <p>[MEMO ITEM]</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>National Bank of Indianapolis</p> <p>Mailing Address 107 North Pennsylvania Street Suite 700</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D279888</p> <p>Date of Disbursement<br/>11 / 21 / 2007</p> <p>Amount of Each Disbursement this Period<br/>10.00</p> <p>[MEMO ITEM]</p> |

**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)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D279747

Date of Disbursement

Mailing Address 107 North Pennsylvania Street  
Suite 700

10 / 29 / 2007

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

672.00

Purpose of Disbursement  
Credit Card Payment, See Below

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
CISION

Transaction ID: D279792

Date of Disbursement

Mailing Address PO Box 98869

10 / 29 / 2007

City Chicago State IL Zip Code 60693-8869

Amount of Each Disbursement this Period

672.00

Purpose of Disbursement  
Video Service

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D279750

Date of Disbursement

Mailing Address 107 North Pennsylvania Street  
Suite 700

10 / 31 / 2007

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

59.76

Purpose of Disbursement  
Credit Card Payment, See Below

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

731.76

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 103 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D279844<br>Date of Disbursement<br>09 / 17 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>172.48  |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement<br>Credit Card Payment, See Below  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281202<br>Date of Disbursement<br>09 / 17 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement<br>Agent Fee   | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281196<br>Date of Disbursement<br>09 / 17 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>35.00   |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement<br>Bank Fee  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 172.48 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D281198  
Date of Disbursement 09 / 17 / 2007

Amount of Each Disbursement this Period 3.07

Category/Type

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Loews Regency Hotel

Mailing Address 540 Park Avenue

City New York State NY Zip Code 10021

Purpose of Disbursement Meal

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D281208  
Date of Disbursement 09 / 17 / 2007

Amount of Each Disbursement this Period 31.01

Category/Type

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D281199  
Date of Disbursement 09 / 17 / 2007

Amount of Each Disbursement this Period 31.75

Category/Type

[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 |

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D279845  
Date of Disbursement

Mailing Address 107 North Pennsylvania Street  
Suite 700

09 / 17 / 2007

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Payment, See Below

Category/  
Type

48.27

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D281015  
Date of Disbursement

Mailing Address 107 North Pennsylvania Street  
Suite 700

12 / 31 / 2007

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Payment, See Below

Category/  
Type

313.73

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Federal Express

Transaction ID: D281020  
Date of Disbursement

Mailing Address P.O. Box 1140

12 / 31 / 2007

City Memphis State TN Zip Code 38101

Amount of Each Disbursement this Period

Purpose of Disbursement  
Shipping

Category/  
Type

55.81

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

362.00

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)

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Staples   | Transaction ID: D281021<br>Date of Disbursement<br>1 2 / 3 1 / 2 0 0 7  |
|    | Mailing Address 500 Staples Drive  | Amount of Each Disbursement this Period<br>165.97   |
|    | City Framingham State MA Zip Code 01702  |   |
|    | Purpose of Disbursement Office Supplies  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    |  |   |
|    |  | [MEMO ITEM]   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D281016<br>Date of Disbursement<br>1 2 / 3 1 / 2 0 0 7  |
|    | Mailing Address P.O. Box 1140  | Amount of Each Disbursement this Period<br>21.62  |
|    | City Memphis State TN Zip Code 38101   |   |
|    | Purpose of Disbursement Shipping   | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    |  |   |
|    |  | [MEMO ITEM]   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Federal Express   | Transaction ID: D281017<br>Date of Disbursement<br>1 2 / 3 1 / 2 0 0 7  |
|    | Mailing Address P.O. Box 1140  | Amount of Each Disbursement this Period<br>34.31  |
|    | City Memphis State TN Zip Code 38101   |   |
|    | Purpose of Disbursement Shipping   | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    |  |   |
|    |  | [MEMO ITEM]   |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|  |  |  |
|--|--|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Federal Express<br>Mailing Address P.O. Box 1140<br>City Memphis State TN Zip Code 38101<br>Purpose of Disbursement Shipping<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D281018<br>Date of Disbursement<br>12 / 31 / 2007<br>Amount of Each Disbursement this Period<br>19.22<br>[MEMO ITEM] |
|  | Category/<br>Type  |  |

|  |  |  |
|--|--|--|
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Federal Express<br>Mailing Address P.O. Box 1140<br>City Memphis State TN Zip Code 38101<br>Purpose of Disbursement Shipping<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D281019<br>Date of Disbursement<br>12 / 31 / 2007<br>Amount of Each Disbursement this Period<br>16.80<br>[MEMO ITEM] |
|  | Category/<br>Type  |  |

|   |  |   |
|---|--|---|
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis<br>Mailing Address 107 North Pennsylvania Street Suite 700<br>City Indianapolis State IN Zip Code 46204<br>Purpose of Disbursement Credit Card Payment, See Below<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D281022<br>Date of Disbursement<br>12 / 31 / 2007<br>Amount of Each Disbursement this Period<br>3006.78 |
|   | Category/<br>Type  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 3006.78 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Loews Regency Hotel   | Transaction ID: D281032<br>Date of Disbursement<br>12 / 31 / 2007 |
|    | Mailing Address 540 Park Avenue  | Amount of Each Disbursement this Period<br>966.94                 |
|    | City New York State NY Zip Code 10021  |   |
|    | Purpose of Disbursement Travel   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Bergen Cruise Limo LLC  | Transaction ID: D281033<br>Date of Disbursement<br>12 / 31 / 2007 |
|    | Mailing Address P.O. Box 2531  | Amount of Each Disbursement this Period<br>350.00                 |
|    | City Branchville State NJ Zip Code 07826   |   |
|    | Purpose of Disbursement Travel   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281024<br>Date of Disbursement<br>12 / 31 / 2007 |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00                  |
|    | City Washington State DC Zip Code 20002  |   |
|    | Purpose of Disbursement Agent Fee  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President               |   |
|    | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Southwest Airlines<br><br>Mailing Address Baltimore Washington International<br><br>City State Zip Code<br>Glen Burnie MD 21061<br><br>Purpose of Disbursement<br>Travel<br><br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D281034<br>Date of Disbursement<br>12 / 31 / 2007<br><br>Amount of Each Disbursement this Period<br>414.80<br><br>[MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial)<br>Carroll Travel<br><br>Mailing Address 201 Massachusetts Avenue, NE<br><br>City State Zip Code<br>Washington DC 20002<br><br>Purpose of Disbursement<br>Agent Fee<br><br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | Transaction ID: D281025<br>Date of Disbursement<br>12 / 31 / 2007<br><br>Amount of Each Disbursement this Period<br>30.00<br><br>[MEMO ITEM]  |
| C. | Full Name (Last, First, Middle Initial)<br>The Drake<br><br>Mailing Address 140 E Walton Pl<br><br>City State Zip Code<br>Chicago IL 60611-1545<br><br>Purpose of Disbursement<br>Travel<br><br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                            | Transaction ID: D281035<br>Date of Disbursement<br>12 / 31 / 2007<br><br>Amount of Each Disbursement this Period<br>289.04<br><br>[MEMO ITEM] |

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281026<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Agent Fee<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>The Drake   | Transaction ID: D281036<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address 140 E Walton Pl  | Amount of Each Disbursement this Period<br>3.31  |
|    | City Chicago State IL Zip Code 60611-1545  |  |
|    | Purpose of Disbursement Travel<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281027<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Agent Fee<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 111 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>US Airways  | Transaction ID: D281028<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address One Aviation Circle  | Amount of Each Disbursement this Period<br>334.40  |
|    | City Washington State DC Zip Code 20001  |  |
|    | Purpose of Disbursement Travel   |  |
|    | Candidate Name   | 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:   |  |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>US Airways  | Transaction ID: D281029<br>Date of Disbursement<br>12 / 31 / 2007  |
|    | Mailing Address One Aviation Circle  | Amount of Each Disbursement this Period<br>334.40  |
|    | City Washington State DC Zip Code 20001  |  |
|    | Purpose of Disbursement Travel   |  |
|    | Candidate Name   | 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:   |  |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>National Bank of Indianapolis   | Transaction ID: D281042<br>Date of Disbursement<br>12 / 19 / 2007  |
|    | Mailing Address 107 North Pennsylvania Street Suite 700  | Amount of Each Disbursement this Period<br>455.18  |
|    | City Indianapolis State IN Zip Code 46204  |  |
|    | Purpose of Disbursement Credit Card Payment, See Below   |  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 455.18 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 112 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D281043  
Date of Disbursement

Mailing Address 107 North Pennsylvania Street  
Suite 700

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 7 |   |

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

|      |
|------|
| 8.80 |
|------|

Purpose of Disbursement  
Bank Fee

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

[MEMO ITEM]

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D281044  
Date of Disbursement

Mailing Address 107 North Pennsylvania Street  
Suite 700

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 7 |   |

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

|       |
|-------|
| 18.50 |
|-------|

Purpose of Disbursement  
Bank Fee

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

[MEMO ITEM]

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
O'Hare Midway Limo

Transaction ID: D281045  
Date of Disbursement

Mailing Address 1419 Lake Cook Rd  
Ste 150

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 7 |   |

City Deerfield State IL Zip Code 60015-5229

Amount of Each Disbursement this Period

|        |
|--------|
| 427.88 |
|--------|

Purpose of Disbursement  
Travel

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

[MEMO ITEM]

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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 113 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Transaction ID: D281046

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 107 North Pennsylvania Street  
Suite 700

Amount of Each Disbursement this Period

|         |
|---------|
| 4358.15 |
|---------|

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Credit Card Payment, See Below

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Westin Indianapolis Hotel

Transaction ID: D281060

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 50 S. Capitol Street

Amount of Each Disbursement this Period

|        |
|--------|
| 286.35 |
|--------|

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Travel

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Carroll Travel

Transaction ID: D281050

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 201 Massachusetts Avenue, NE

Amount of Each Disbursement this Period

|       |
|-------|
| 30.00 |
|-------|

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Agent Fee

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

|         |
|---------|
| 4358.15 |
|---------|

**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 114 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281051<br>Date of Disbursement<br>11 / 21 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Agent Fee<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Carroll Travel  | Transaction ID: D281052<br>Date of Disbursement<br>11 / 21 / 2007  |
|    | Mailing Address 201 Massachusetts Avenue, NE   | Amount of Each Disbursement this Period<br>30.00   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Agent Fee<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>United Airlines   | Transaction ID: D281053<br>Date of Disbursement<br>11 / 21 / 2007  |
|    | Mailing Address 1555 K Street, NW  | Amount of Each Disbursement this Period<br>2090.80   |
|    | City Washington State DC Zip Code 20002  |  |
|    | Purpose of Disbursement Travel<br>Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
United Airlines

Transaction ID: D281054  
Date of Disbursement

Mailing Address 1555 K Street, NW

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 7 | 7 |

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel

|  |
|--|
|  |
|--|

|        |
|--------|
| 163.40 |
|--------|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)  
United Airlines

Transaction ID: D281055  
Date of Disbursement

Mailing Address 1555 K Street, NW

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 7 | 7 |

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel

|  |
|--|
|  |
|--|

|        |
|--------|
| 174.00 |
|--------|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)  
Southwest Airlines

Transaction ID: D281056  
Date of Disbursement

Mailing Address Baltimore Washington International

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 7 | 7 |

City Glen Burnie State MD Zip Code 21061

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel

|  |
|--|
|  |
|--|

|       |
|-------|
| 64.00 |
|-------|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

[MEMO ITEM]

State: District:

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 116 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Southwest Airlines

Mailing Address Baltimore Washington International

City State Zip Code  
Glen Burnie MD 21061

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D281057  
Date of Disbursement  
11 / 21 / 2007

Amount of Each Disbursement this Period  
124.40

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D281047  
Date of Disbursement  
11 / 21 / 2007

Amount of Each Disbursement this Period  
35.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
National Bank of Indianapolis

Mailing Address 107 North Pennsylvania Street  
Suite 700

City State Zip Code  
Indianapolis IN 46204

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D281048  
Date of Disbursement  
11 / 21 / 2007

Amount of Each Disbursement this Period  
10.00

[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 117 / 120

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

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NAME OF COMMITTEE (In Full)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address 1555 K Street, NW

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D281058  
Date of Disbursement

11 / 21 / 2007

Amount of Each Disbursement this Period

617.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Agent Fee

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D281049  
Date of Disbursement

11 / 21 / 2007

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address One Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D281059  
Date of Disbursement

11 / 21 / 2007

Amount of Each Disbursement this Period

672.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

138985.73

# 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)  
All America PAC

A.

Full Name (Last, First, Middle Initial)  
Friends of Senator Carl Levin

Transaction ID: D279500

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 0 | 7 |

Mailing Address 10 G Street, NE  
Suite 470

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name  
Senator Carl Levin

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MI District:

B.

Full Name (Last, First, Middle Initial)  
Donnelly for Congress Committee

Transaction ID: D279494

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 7 |   | 2 | 0 | 0 | 7 |

Mailing Address PO Box 1961

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

City South Bend State IN Zip Code 46634

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name  
Joe Donnelly

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: IN District: 02

C.

Full Name (Last, First, Middle Initial)  
Friends of Mary Landrieu, Inc

Transaction ID: D279495

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 0 | 7 |

Mailing Address 607 14th Street, NW  
Suite 800

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name  
Mary L. Landrieu

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: LA District:

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

|         |
|---------|
| 9500.00 |
|---------|

**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)

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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)  
All America PAC

|   |   |
|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Friends of Mary Landrieu, Inc<br><hr/> Mailing Address 607 14th Street, NW<br>Suite 800<br><hr/> City Washington State DC Zip Code 20005<br><hr/> Purpose of Disbursement<br>Contribution<br>Candidate Name<br>Mary L. Landrieu<br><hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: LA District:<br>Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D279496<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 2 1 / 2 0 0 7 |
|   | Amount of Each Disbursement this Period<br>1500.00  |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Friends of Mary Landrieu, Inc<br><hr/> Mailing Address 607 14th Street, NW<br>Suite 800<br><hr/> City Washington State DC Zip Code 20005<br><hr/> Purpose of Disbursement<br>Contribution<br>Candidate Name<br>Mary L. Landrieu<br><hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: LA District:<br>Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D279497<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 9 / 3 0 / 2 0 0 7 |
|   | Amount of Each Disbursement this Period<br>2500.00  |

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

4000.00

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

13500.00

