

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 7 HANOVER SQUARE
 Check if different than previously reported. (ACC)
NEW YORK NY 10004

2. **FEC IDENTIFICATION NUMBER** C00418731
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Luke Durben
Signature of Treasurer Electronically Filed by Luke Durben Date 07 13 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		0.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	4400.00									
(c) Total Receipts (from Line 19)	15970.22	20370.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20370.22	20370.22								
7. Total Disbursements (from Line 31)	161.78	161.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20208.44	20208.44								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9750.08	13500.08
(i) Itemized (use Schedule A)	6220.14	6870.14
(ii) Unitemized	15970.22	20370.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15970.22	20370.22
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15970.22	20370.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15970.22	20370.22

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	161.78	161.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	161.78	161.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	161.78	161.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	161.78	161.78

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15970.22	20370.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15970.22	20370.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	161.78	161.78
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	161.78	161.78

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Michael W. Anderson		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 499 Anna Lynn Ln		Transaction ID: 64-P509	
City Horsham	State PA	Zip Code 19044-1511	Amount of Each Receipt this Period _____ 41.67
FEC ID number of contributing federal political committee. C _____		Payroll Deduction (\$41.67 Semi-Monthly)	
Name of Employer Willis Americas Administr- ation Inc.	Occupation Senior Resource Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 208.35		

Full Name (Last, First, Middle Initial) B. Matthew P. Ansbro		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address 1631 Easton Rd		Transaction ID: 52	
City Kintnersville	State PA	Zip Code 18930-9768	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____		Payroll Deduction (\$41.67 Semi-Monthly)	
Name of Employer None		Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00		

Full Name (Last, First, Middle Initial) C. Donald J Bailey		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 107 Westminster Road		Transaction ID: 64-P511	
City Chatham	State NY	Zip Code 79280	Amount of Each Receipt this Period _____ 166.68
FEC ID number of contributing federal political committee. C _____		Payroll Deduction (\$41.67 Semi-Monthly)	
Name of Employer Willis Americas Administr- ation Inc.		Occupation National Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 333.36		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 708.35
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 17	PAGE 7 / 15
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NAME OF COMMITTEE (In Full)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. John J. Bullock		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address PO Box 278		Transaction ID: 54	
City Pascagoula	State MS	Amount of Each Receipt this Period 1000.00	
Zip Code 39568-0278		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer None	Occupation None	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 1000.00	

Full Name (Last, First, Middle Initial) B. Mary E Caiazzo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 164 N Van Dien Ave		Transaction ID: 53	
City Ridgewood	State NJ	Amount of Each Receipt this Period 500.00	
Zip Code 07450-3437		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer None	Occupation None	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) C. William B. Chambers		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 12 Betty Bush Ln		Transaction ID: 39	
City Baltimore	State MD	Amount of Each Receipt this Period 250.00	
Zip Code 21212-1051		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Willis of Maryland Inc.	Occupation Producer/Account Executive	Amount of Each Receipt this Period 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	1750.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. William B. Corrigan		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 64-P516	
Mailing Address 30 Pease Ave		Amount of Each Receipt this Period 249.99	
City Verona	State NJ	Zip Code 07044-1403	Payroll Deduction (\$83.33 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Willis North America Inc.	Occupation National Finance Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.65		

Full Name (Last, First, Middle Initial) B. William L Esler		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 64-P519	
Mailing Address 6027 Rose Street		Amount of Each Receipt this Period 166.68	
City Houston	State TX	Zip Code 77007	Payroll Deduction (\$41.67 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Willis of Greater Texas Inc.	Occupation Managing Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36		

Full Name (Last, First, Middle Initial) C. Peter C. Hearn		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 43	
Mailing Address 7021 Lafayette Ave		Amount of Each Receipt this Period 2000.00	
City Fort Washington	State PA	Zip Code 19034-2001	
FEC ID number of contributing federal political committee. C			
Name of Employer Willis Re	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2416.67
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 15
	(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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Deneen M Huber		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3607 North Ridge Drive		Transaction ID: 64-P524	
City State Zip Code Allison Park PA 15101	Amount of Each Receipt this Period _____ 125.01		
FEC ID number of contributing federal political committee. C _____	Payroll Deduction (\$41.67 Semi-Monthly)		
Name of Employer Willis Americas Administr- ation Inc.	Occupation Senior Resource Consultant	Aggregate Year-to-Date ▼ _____ 291.69	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. John B. Jacobs		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13459 E Wethersfield Rd		Transaction ID: 64-P525	
City State Zip Code Scottsdale AZ 85259-2233	Amount of Each Receipt this Period _____ 249.99		
FEC ID number of contributing federal political committee. C _____	Payroll Deduction (\$83.33 Semi-Monthly)		
Name of Employer Willis of Arizona	Occupation Producer	Aggregate Year-to-Date ▼ _____ 416.65	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Jay M. Kirschbaum		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1520 Woodroyal East Dr		Transaction ID: 64-P528	
City State Zip Code Chesterfield MO 63017-5550	Amount of Each Receipt this Period _____ 41.67		
FEC ID number of contributing federal political committee. C _____	Payroll Deduction (\$41.67 Semi-Monthly)		
Name of Employer Willis Americas Administr- ation	Occupation Senior Consultant	Aggregate Year-to-Date ▼ _____ 208.35	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 416.67
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 15
	<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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Thomas R. Lewis		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 801 W Moon Valley Dr		Transaction ID: 64-P530
City Phoenix	State AZ	Zip Code 85023-6219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer Willis of Arizona Inc.	Occupation Regional Partner	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.35	(\$41.67 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Mark B. Maxson		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5 Via Hermosa		0 5 / 0 3 / 2 0 0 6
City Orinda	State CA	Zip Code 94563-1827
FEC ID number of contributing federal political committee. C		Transaction ID: 50
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Claire E Panagopoulos		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5069 Abbington Ridge Lane		
City Franklin	State TN	Zip Code 37067
FEC ID number of contributing federal political committee. C		Transaction ID: 56-P352
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer Willis Americas Administration Inc.	Occupation Service Director	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	(\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	1125.01
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 15
	<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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. James Porter		Date of Receipt MM / DD / YYYY 04 / 06 / 2006
Mailing Address 50 Battery Pl Apt 7X		Transaction ID: 38
City New York	State NY	Zip Code 10280-1531
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Willis North America	Occupation Group Sales Training Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mark E Reagan		Date of Receipt MM / DD / YYYY
Mailing Address 45 Hardscrabble Road		Transaction ID: 64-P541
City Basking Ridge	State NJ	Zip Code 79320
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Willis Americas Administration Inc.	Occupation Practice Leader	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	(\$125.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. David L Robertson		Date of Receipt MM / DD / YYYY
Mailing Address 875 Old Creek Trail		Transaction ID: 64-P543
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.35
Name of Employer Willis Ins.Services of Georgia	Occupation Regional Partner	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.03	(\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	1708.35
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 14 / 15

<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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. SunTrust Bank of Nashville		Transaction ID: 48 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 305110		Amount of Each Disbursement this Period 99.76
City Nashville State TN Zip Code 37230	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

Full Name (Last, First, Middle Initial) B. SunTrust Bank of Nashville		Transaction ID: 49 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 305110		Amount of Each Disbursement this Period 31.51
City Nashville State TN Zip Code 37230	Purpose of Disbursement Bank Charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

Full Name (Last, First, Middle Initial) C. SunTrust Bank of Nashville		Transaction ID: 57 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 305110		Amount of Each Disbursement this Period 21.15
City Nashville State TN Zip Code 37230	Purpose of Disbursement Account Analysis Fee (Bank Fee) Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	152.42
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<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)
WILLIS NORTH AMERICA INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
SunTrust Bank of Nashville

Mailing Address P.O. Box 305110

City Nashville State TN Zip Code 37230

Purpose of Disbursement Bank Charges
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 62
Date of Disbursement
06 / 20 / 2006

Amount of Each Disbursement this Period
9.36

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

9.36

TOTAL This Period (last page this line number only)

161.78