

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

IRL PAC

ADDRESS (number and street) P.O. Box 10460

Check if different than previously reported. (ACC) Burke VA 22009 0460

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00402982

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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), Convention (12C), General (12G), Special (12G), Runoff (12R)

Election on in the State of

- (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on in the State of

5. Covering Period 07 01 2006 through 07 31 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 Tara Tamargo, Assistant Treasurer

Signature of Treasurer Electronically Filed by Tara Tamargo, Assistant Treasurer Date 04 19 2009

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

Table with 10 columns and 1 row. The first column is labeled 'Office Use Only'.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
IRL PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
3	1

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		475707.44
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	305421.64									
(c) Total Receipts (from Line 19)	6500.00	38600.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	311921.64	514307.44								
7. Total Disbursements (from Line 31)	25251.19	227636.99								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	286670.45	286670.45								
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
IRL PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
3	1

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	6500.00	34500.00
(i) Itemized (use Schedule A)	0.00	100.00
(ii) Unitemized	6500.00	34600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	2000.00
(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)	6500.00	36600.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2000.00
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))	6500.00	38600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6500.00	38600.00

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.....	251.19	636.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	251.19	636.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	227000.00
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))..	25251.19	227636.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25251.19	227636.99

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)	6500.00	36600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6500.00	36600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	251.19	636.99
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	251.19	636.99

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

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

FOR LINE NUMBER: PAGE 6 / 13
(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)
IRL PAC

A. Full Name (Last, First, Middle Initial)
Abraham Alonso

Mailing Address 14612 SW 172nd Lane

City State Zip Code
Miami FL 33177

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

Name of Employer Occupation
The Home Depot Loss Prevention

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2006

Transaction ID: SA11AI.5453

Amount of Each Receipt this Period
2000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Paul Lobo, Jr.

Mailing Address 425 East 85th Street

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
The Washington Group Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2006

Transaction ID: SA11AI.5465

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Guy Molinari

Mailing Address 5 Skyline Drive

City State Zip Code
Upper Saddle River NJ 07456

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

Name of Employer Occupation
Heller Ehrman White&McAuliffe Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 08 / 2006

Transaction ID: SA11AI.5458

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
IRL PAC

A. Full Name (Last, First, Middle Initial)
Susan Molinari
Mailing Address 4004 Sharp Place
City Alexandria State VA Zip Code 22304
FEC ID number of contributing federal political committee. **C**
Name of Employer Washington Group Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 07 / 17 / 2006
Transaction ID: SA11AI.5462
Amount of Each Receipt this Period 1000.00
Contribution

B. Full Name (Last, First, Middle Initial)
Eugene Patrone, III
Mailing Address 4721 N. Washington Blvd
City Arlington State VA Zip Code 22205
FEC ID number of contributing federal political committee. **C**
Name of Employer The Washington Group Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 07 / 17 / 2006
Transaction ID: SA11AI.5457
Amount of Each Receipt this Period 500.00
Contribution

C. Full Name (Last, First, Middle Initial)
William Paxon
Mailing Address 4004 Sharp Place
City Alexandria State VA Zip Code 22304
FEC ID number of contributing federal political committee. **C**
Name of Employer Akin, Gump, LLC Occupation Senior Advisor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 07 / 17 / 2006
Transaction ID: SA11AI.5460
Amount of Each Receipt this Period 500.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 2000.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
IRL PAC

A. Full Name (Last, First, Middle Initial)
Brett Shogren

Mailing Address 4234 42nd Street, N.W.

City State Zip Code
Washington DC 20016

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

Name of Employer Occupation
The Washington Group Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2006

Transaction ID: SA11AI.5463

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Julie Wadler

Mailing Address 104 Hume Avenue

City State Zip Code
Alexandria VA 22301

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

Name of Employer Occupation
Self-employed Fundraiser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2006

Transaction ID: SA11AI.5455

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ► 6500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 / 13

<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)
IRL PAC

A.	Full Name (Last, First, Middle Initial) Staples			Transaction ID: SB21B.5489		
	Mailing Address 9230 Old Keene Mill			Date of Disbursement 07 / 10 / 2006		
	City Burke	State VA	Zip Code 22015	Amount of Each Disbursement this Period 173.19		
	Purpose of Disbursement Expense		001 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:					

SUBTOTAL of Disbursements This Page (optional)	▶	173.19
TOTAL This Period (last page this line number only)	▶	173.19

**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 11 / 13

<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)
IRL PAC

A. Full Name (Last, First, Middle Initial) FRIENDS OF DON SHERWOOD Mailing Address 81 WARREN STREET City TUNKHANNOCK State PA Zip Code 18675 Purpose of Disbursement Political Contribution Candidate Name FRIENDS OF DON SHERWOOD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5480 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011

B. Full Name (Last, First, Middle Initial) JD HAYWORTH FOR CONGRESS Mailing Address 14300 N. Northsight Blvd. #105 City Scottsdale State AZ Zip Code 85260 Purpose of Disbursement Political Contribution Candidate Name JD HAYWORTH FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5470 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011

C. Full Name (Last, First, Middle Initial) LAMBERTI FOR CONGRESS Mailing Address PO BOX 785 City ANKENY State IA Zip Code 50021 Purpose of Disbursement Political Contribution Candidate Name LAMBERTI FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5477 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
IRL PAC

A. Full Name (Last, First, Middle Initial)
RAY MEIER FOR CONGRESS COMMITTEE

Mailing Address PO BOX 120

City UTICA State NY Zip Code 13503

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
RAY MEIER FOR CONGRESS COMMITTEE

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: NY District: 24

Transaction ID: SB23.5484
Date of Disbursement

07 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
SALI FOR CONGRESS

Mailing Address PO Box 71

City KUNA State ID Zip Code 83634

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
SALI FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: ID District: 01

Transaction ID: SB23.5473
Date of Disbursement

07 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
SUE KELLY FOR CONGRESS

Mailing Address PO Box 599

City Katonah State NY Zip Code 10536

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
SUE KELLY FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.5482
Date of Disbursement

07 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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 13 / 13

<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)
IRL PAC

A.

Full Name (Last, First, Middle Initial)
WHALEN FOR CONGRESS

Transaction ID: SB23.5475

Date of Disbursement

Mailing Address P. O. Box 750

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	0	6

City Bettendorf State IA Zip Code 52722

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Political Contribution

011
Category/ Type

Candidate Name
WHALEN FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IA District: 01

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

25000.00
