

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Hill PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

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		71555.80
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	83369.49									
(c) Total Receipts (from Line 19)	105011.04	1358994.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	188380.53	1430550.15								
7. Total Disbursements (from Line 31)	140625.05	1382794.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	47755.48	47755.48								
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)	43735.63									

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
Hill PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

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	79850.00	1161320.00
(i) Itemized (use Schedule A)	3335.50	6755.50
(ii) Unitemized	83185.50	1168075.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	18000.00	165797.26
(c) Other Political Committees (such as PACs)	101185.50	1333872.76
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	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)	3592.56	3994.86
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	232.98	21126.73
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))	105011.04	1358994.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	105011.04	1358994.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	41625.05	922589.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	41625.05	922589.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	87000.00	397000.00
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	7000.00	13305.00
(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))	7000.00	13305.00
29. Other Disbursements.....	5000.00	49899.99
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))..	140625.05	1382794.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	140625.05	1382794.67

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)	101185.50	1333872.76
34. Total Contribution Refunds (from Line 28(d))	7000.00	13305.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	94185.50	1320567.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	41625.05	922589.68
37. Offsets to Operating Expenditures (from Line 15, page 3)	3592.56	3994.86
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38032.49	918594.82

**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 / 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Hill PAC

Full Name (Last, First, Middle Initial) A. Edgar Bronfman, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address c/o Warner Music Group 75 Rockefeller Plaza		Transaction ID: C59968	
City State Zip Code New York NY 10019	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Warner Music Group	Occupation Chariman/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Michael D. D'Arcangelo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 149 Winchester Lane		Transaction ID: C59945	
City State Zip Code Newtown PA 18940	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Complete Healthcare Resources	Occupation Senior Executive Vice President		
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. J. Norman Estes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 11142 Telmar Drive		Transaction ID: C59946	
City State Zip Code Northport AL 35475	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NHS Management LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Joseph H. Flom		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address c/o Skadden Arps et al. LLP 4 Times Square		Transaction ID: C59969
City State Zip Code New York NY 10036	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Skadden Arps et al. LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Sonia Florian		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 5 Bridle Lane		Transaction ID: C59947
City State Zip Code Bannockburn IL 60015	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Dorian S. Goldman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 835 Hardscrabble Road		Transaction ID: C59970
City State Zip Code Chappaqua NY 10514-3011	Amount of Each Receipt this Period 4900.00	
FEC ID number of contributing federal political committee. C		
Name of Employer BLDG Management	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4900.00	

SUBTOTAL of Receipts This Page (optional) ▶	14900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Veronica W. Hackett		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 169 East 69th Street		Transaction ID: C59976
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3250.00
Name of Employer The Clarett Group	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3250.00	

Full Name (Last, First, Middle Initial) B. Robert O. Hill, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 2510 Trails End		Transaction ID: C59948
City Kinston	State NC	Zip Code 28504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Brent Haven Retirement Home	Occupation Owner	
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. John H. Josephson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 211 Central Park West Apartment 9K		Transaction ID: C59977
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Allen & Company	Occupation Managing Director	
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)	▶	6250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Roland J. Jung		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 3600 Wilshire Boulevard Number 732		Transaction ID: C59959
City State Zip Code Los Angeles CA 90010	Amount of Each Receipt this Period 3700.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Roland International Co.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3700.00	

Full Name (Last, First, Middle Initial) B. Jurate Kazickas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 15 East 92nd Street		Transaction ID: C59971
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. George A. Kellner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 900 3rd Avenue		Transaction ID: C59960
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Kellner DiLeo & Co.	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	9700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 57
	<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)
Hill PAC

A. Full Name (Last, First, Middle Initial)
Bill Lambert

Mailing Address 7 West 81st Street

City State Zip Code
New York NY 10024

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

Name of Employer N/A Occupation Retired

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 / 0 6 / 2 0 0 6

Transaction ID: C59955

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Darby Luxenberg

Mailing Address 6067 Highland Circle North

City State Zip Code
Mobile AL 36608

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: C59967

Amount of Each Receipt this Period
2100.00

C. Full Name (Last, First, Middle Initial)
Patricia Lynch

Mailing Address 66 Hilltop Drive

City State Zip Code
Chappaqua NY 10514-1917

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

Name of Employer PLA Associates Occupation Government Affairs/Media Relations

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 / 0 9 / 2 0 0 6

Transaction ID: C59961

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	8100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Terence S. Meehan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6
Mailing Address 39 Broadway 36th Floor		Transaction ID: C59962
City State Zip Code New York NY 10006	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Azimuth Trust	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ken Miller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 63 West 17th Street 7th Floor		Transaction ID: C59972
City State Zip Code New York NY 10011	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Lehman Brothers	Occupation Investment Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Stephen Nislick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 100 Washington Street		Transaction ID: C59956
City State Zip Code Newark NJ 07102	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Edison Properties LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Richard C. Perry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1 Sutton Place South Penthouse		Transaction ID: C59943
City State Zip Code New York NY 10022-2471	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Perry Corp.	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Floyd A. Schlossberg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 4200 West Peterson Avenue Suite 140		Transaction ID: C59949
City State Zip Code Chicago IL 60646	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Alden Management	Occupation President	
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. David L. Shuman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 101 Park Avenue 4th Floor		Transaction ID: C59973
City State Zip Code New York NY 10178	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bridger Capital	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. John A. Sykes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 911 Park Avenue Apartment 12A		Transaction ID: C59978
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Viacom/MTV Networks	Occupation President, Network Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) B. Carole Shields Westbrook		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 158 South Prospect Drive		Transaction ID: C59974
City State Zip Code Coral Gables FL 33133	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Paul Sawi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6
Mailing Address 2905 Garber Street		Transaction ID: C60041A
City State Zip Code Berkeley CA 94705	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Ranch Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional) ▶	7400.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 6	
Mailing Address Post Office Box 382110		Transaction ID: C60041AB	
City State Zip Code Cambridge MA 02238-2110	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C C00401224			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Conduit total: 4,032.50 Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial) B. Joseph Vassallo		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 2495 15th Street		Transaction ID: C60056A	
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant Aggregate Year-to-Date ▼ 500.00		

* Earmarked Contribution:
See Below

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address Post Office Box 382110		Transaction ID: C60056AB	
City State Zip Code Cambridge MA 02238-2110	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C C00401224			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Conduit total: 4,032.50 Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	79850.00

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 15 / 57
	<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Advocat Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 1621 Galleria Boulevard		Transaction ID: C59950	
City State Zip Code Brentwood TN 37027	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00421735			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Florida For Americas Future PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 100 South Biscayne Boulevard 15th Floor		Transaction ID: C59975	
City State Zip Code Miami FL 33131	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00400242			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Genesis Healthcare Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 101 East State Street		Transaction ID: C59965	
City State Zip Code Kennett Square PA 19348	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00292094			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 57
	(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)
Hill PAC

Full Name (Last, First, Middle Initial) A. HCR Manor Care PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 333 North Summit Street 16th Floor		Transaction ID: C59951
City Toledo State OH Zip Code 43699-0086	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00260141		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Kindred Healthcare Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 680 South 4th Street		Transaction ID: C59966
City Louisville State KY Zip Code 40202	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00242271		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Medical Facilities of America Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 2917 Penn Forest Boulevard Suite 300		Transaction ID: C59952
City Roanoke State VA Zip Code 24018	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00405472		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 57
	(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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Sun Healthcare Group Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 101 Sun Avenue, N.E.		Transaction ID: C59953
City State Zip Code Albuquerque NM 87109-4373	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00398826		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. United Health Services PAC, Inc.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 409 East Doyle Street		Transaction ID: C59954
City State Zip Code Toccoa GA 30577	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00400135		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	18000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 57	
	(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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hill PAC

A. Full Name (Last, First, Middle Initial)
Covington Industries

Mailing Address 15 East 26th Street

City	State	Zip Code
New York	NY	10010

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3592.56

Date of Receipt

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

Transaction ID: C59958

Amount of Each Receipt this Period
3592.56

Security Deposit Refund

SUBTOTAL of Receipts This Page (optional)	▶	3592.56
TOTAL This Period (last page this line number only)	▶	3592.56

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 19 / 57	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hill PAC

A. Full Name (Last, First, Middle Initial)
Walter Karl

Mailing Address 2 Blue Hill Plaza
Post Office Box 1662

City Pearl River State NY Zip Code 10965-8662

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8188.69

Date of Receipt

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

Transaction ID: C59964

Amount of Each Receipt this Period
232.98

List Rental Income

SUBTOTAL of Receipts This Page (optional)	▶	232.98
TOTAL This Period (last page this line number only)	▶	232.98

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Huma Abedin		Transaction ID: D7026 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 2020 12th Street, N.W. Apartment 709		Amount of Each Disbursement this Period 819.33
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Aetna US Healthcare		Transaction ID: D7004 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1301 McCormick Drive Mailstop F264		Amount of Each Disbursement this Period 2390.44
City Largo State MD Zip Code 20774		
Purpose of Disbursement Health Insurance Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Samir Arora		Transaction ID: D7050 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1601 18th Street, N.W. Apartment 1007		Amount of Each Disbursement this Period 161.67
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3371.44
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 21 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Kathryn Balcerzak		Transaction ID: D7033 Date of Disbursement 10 / 13 / 2006
Mailing Address 7303 Meadow Wood Way		Amount of Each Disbursement this Period 248.05
City Clarksville State MD Zip Code 21209	001 Category/ Type	
Purpose of Disbursement Wages 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:		

Full Name (Last, First, Middle Initial) B. Jesse Berney		Transaction ID: D7082 Date of Disbursement 10 / 13 / 2006
Mailing Address 428 Jefferson Street, N.W.		Amount of Each Disbursement this Period 671.19
City Washington State DC Zip Code 20011	001 Category/ Type	
Purpose of Disbursement Wages 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:		

Full Name (Last, First, Middle Initial) C. Boston Mutual Life Insurance Co.		Transaction ID: D7042 Date of Disbursement 10 / 12 / 2006
Mailing Address One Enterprise Drive Suite 2		Amount of Each Disbursement this Period 93.09
City Shelton State CT Zip Code 06484	001 Category/ Type	
Purpose of Disbursement Employee Benefits 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) ▶	1012.33
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Card Services International		Transaction ID: D7081 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address Post Office Box 5180		Amount of Each Disbursement this Period 12.55
City Simi Valley State CA Zip Code 93062-5180	Purpose of Disbursement Banking 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Central Parking System		Transaction ID: D7043 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 1225 Eye Street, N.W. Lower Level		Amount of Each Disbursement this Period 191.25
City Washington State DC Zip Code 20005	Purpose of Disbursement Parking Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Dennis Cheng		Transaction ID: D7051 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 9 West 31st Street Apartment 15F		Amount of Each Disbursement this Period 326.84
City New York State NY Zip Code 10001	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	530.64
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 23 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Cindy Cicarell		Transaction ID: D7054 Date of Disbursement 10 / 13 / 2006
Mailing Address 1785 Lewis Road		Amount of Each Disbursement this Period 267.50
City South Wales State NY Zip Code 14139	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: D7047 Date of Disbursement 10 / 04 / 2006
Mailing Address Post Office Box 8229		Amount of Each Disbursement this Period 27.13
City Aurora State IL Zip Code 60572	Purpose of Disbursement Telephone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cingular Wireless		Transaction ID: D7048 Date of Disbursement 10 / 04 / 2006
Mailing Address Post Office Box 8229		Amount of Each Disbursement this Period 93.49
City Aurora State IL Zip Code 60572	Purpose of Disbursement Telephone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	388.12
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Cingular Wireless		Transaction ID: D7049 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 8229		Amount of Each Disbursement this Period 993.05
City Aurora State IL Zip Code 60572		
Purpose of Disbursement Telephone Service Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Covad		Transaction ID: D7032 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Post Office Box 39000 Department 33408		Amount of Each Disbursement this Period 72.49
City San Francisco State CA Zip Code 94139		
Purpose of Disbursement Internet Service Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cushman & Wakefield		Transaction ID: D7041 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1650 Tyson's Boulevard Commercial Accts Receivable		Amount of Each Disbursement this Period 3847.62
City McLean State VA Zip Code 22102		
Purpose of Disbursement Office Rent Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4913.16
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Cybersource		Transaction ID: D7084 Date of Disbursement
Mailing Address 1295 Charleston Road		<input type="text" value="10"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Banking Fee	<input type="text" value="001"/>	
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:		
		Amount of Each Disbursement this Period <input type="text" value="100.05"/>

Full Name (Last, First, Middle Initial) B. Dahl Communications, Inc.		Transaction ID: D7085 Date of Disbursement
Mailing Address 7250 Beauregard Court		<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Warrenton	State VA	Zip Code 20187
Purpose of Disbursement Telephone Service	<input type="text" value="001"/>	
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:		
		Amount of Each Disbursement this Period <input type="text" value="57.50"/>

Full Name (Last, First, Middle Initial) C. Nalinee Darmrong		Transaction ID: D7034 Date of Disbursement
Mailing Address 1629 Columbia Road, N.W. Apartment 216		<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Washington	State DC	Zip Code 20009
Purpose of Disbursement Wages	<input type="text" value="001"/>	
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:		
		Amount of Each Disbursement this Period <input type="text" value="240.69"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="398.24"/>
TOTAL 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. De Lage Landen Financial Services		Transaction ID: D7072 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 41601		Amount of Each Disbursement this Period 179.17
City Philadelphia State PA Zip Code 19101-1601	Purpose of Disbursement Office Equipment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. Deer Park		Transaction ID: D7053 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 52271		Amount of Each Disbursement this Period 54.25
City Phoenix State AZ Zip Code 85072	Purpose of Disbursement Beverages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. DirecTV		Transaction ID: D7029 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Post Office Box 60036		Amount of Each Disbursement this Period 80.96
City Los Angeles State CA Zip Code 90060	Purpose of Disbursement Subscription Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	314.38
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. DirecTV		Transaction ID: D7030 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 60036		Amount of Each Disbursement this Period 8.12
City Los Angeles State CA Zip Code 90060	Purpose of Disbursement Subscription Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. Patricia Solis Doyle		Transaction ID: D7006 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 3719 Morrison Street, N.W.		Amount of Each Disbursement this Period 53.88
City Washington State DC Zip Code 20015	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Patricia Solis Doyle		Transaction ID: D7007 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 3719 Morrison Street, N.W.		Amount of Each Disbursement this Period 2474.42
City Washington State DC Zip Code 20015	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	2536.42
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Nancy Eiring		Transaction ID: D7071 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 1213 Duncan Place, N.E.		Amount of Each Disbursement this Period 963.03	
City Washington State DC Zip Code 20002	Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Electronic Transaction Systems		Transaction ID: D7091 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 10 Pidgeon Hill Drive		Amount of Each Disbursement this Period 424.89	
City Sterling State VA Zip Code 20165	Purpose of Disbursement Banking Fee Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lauren Fitterman		Transaction ID: D7057 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 2400 16th Street, N.W. Apartment 504		Amount of Each Disbursement this Period 214.06	
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1601.98
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Dara Freed		Transaction ID: D7044 Date of Disbursement 10 / 13 / 2006
Mailing Address 383 Grand Street Apartment M306		Amount of Each Disbursement this Period 1015.38
City New York State NY Zip Code 10002	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. John Gans		Transaction ID: D7058 Date of Disbursement 10 / 13 / 2006
Mailing Address 1425 P Street, N.W. Apartment 301		Amount of Each Disbursement this Period 1660.96
City Washington State DC Zip Code 20005	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Patrick Hallahan		Transaction ID: D7068 Date of Disbursement 10 / 13 / 2006
Mailing Address 2011 Hillyer Place, N.W. Apartment 2		Amount of Each Disbursement this Period 416.60
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3092.94
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 30 / 57

<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)
Hill PAC

A. Jada Horton Full Name (Last, First, Middle Initial) Mailing Address 101 West 126th Street Apartment 2-A City New York State NY Zip Code 10027 Purpose of Disbursement Wages 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) ▼		Transaction ID: D7086 Date of Disbursement 10 / 13 / 2006 Amount of Each Disbursement this Period 348.94 001 Category/ Type
---	--	---

B. Ikon Financial Services Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 41564 City Philadelphia State PA Zip Code 19101-1564 Purpose of Disbursement Office Equipment 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) ▼		Transaction ID: D7045 Date of Disbursement 10 / 04 / 2006 Amount of Each Disbursement this Period 49.57 001 Category/ Type
--	--	--

C. Lindsey K. Jack Full Name (Last, First, Middle Initial) Mailing Address 2601 Woodley Place, N.W. Apartment 915 City Washington State DC Zip Code 20008 Purpose of Disbursement Wages 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) ▼		Transaction ID: D7052 Date of Disbursement 10 / 13 / 2006 Amount of Each Disbursement this Period 161.61 001 Category/ Type
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SUBTOTAL of Disbursements This Page (optional)	560.12
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)
Hill PAC

Full Name (Last, First, Middle Initial) A. James Center Property, LLC		Transaction ID: D7075 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 8000 Department 454		Amount of Each Disbursement this Period 75.00
City Buffalo State NY Zip Code 14267		
Purpose of Disbursement Office Rent	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jonathan Lovett		Transaction ID: D7070 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 113		Amount of Each Disbursement this Period 376.45
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bari Lurie		Transaction ID: D7027 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1743 P Street, N.W. Number 404		Amount of Each Disbursement this Period 60.00
City Washington State DC Zip Code 20009		
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	511.45
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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Bari Lurie		Transaction ID: D7028 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1743 P Street, N.W. Number 404		Amount of Each Disbursement this Period 958.42
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tamera Luzzatto		Transaction ID: D7036 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 3014 32nd Street, N.W.		Amount of Each Disbursement this Period 517.02
City Washington State DC Zip Code 20008	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Capricia Marshall		Transaction ID: D7025 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1413 44th Street, N.W.		Amount of Each Disbursement this Period 1373.08
City Washington State DC Zip Code 20007	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2848.52
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 33 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Shelly Moskwa		Transaction ID: D7014 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 1744 V Street, N.W.		Amount of Each Disbursement this Period 216.91	
City Washington State DC Zip Code 20009	Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anne Mullaly		Transaction ID: D7079 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 99 Battery Place Apartment 11J		Amount of Each Disbursement this Period 316.00	
City New York State NY Zip Code 10280	Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NGP Software		Transaction ID: D7005 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 5505 Connecticut Avenue, N.W. Post Mail Box 277		Amount of Each Disbursement this Period 196.88	
City Washington State DC Zip Code 20015	Purpose of Disbursement Consulting/Computers Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	729.79
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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Sara O'Keefe		Transaction ID: D7069 Date of Disbursement 10 / 13 / 2006	
Mailing Address 4200 Fordham Road, N.W.		Amount of Each Disbursement this Period 634.69	
City Washington State DC Zip Code 20016	Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Adam J. Parkhomenko		Transaction ID: D7037 Date of Disbursement 10 / 04 / 2006	
Mailing Address 901 North Pollard Street Number 301		Amount of Each Disbursement this Period 18.50	
City Arlington State VA Zip Code 22203	Purpose of Disbursement Office Supplies Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Adam J. Parkhomenko		Transaction ID: D7038 Date of Disbursement 10 / 13 / 2006	
Mailing Address 901 North Pollard Street Number 301		Amount of Each Disbursement this Period 668.95	
City Arlington State VA Zip Code 22203	Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1322.14
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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: D7008 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 271.07
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Service Fee Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: D7009 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 175.00
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement 401(k) Fee Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PNC Bank		Transaction ID: D7055 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6
Mailing Address 808 17th Street, N.W.		Amount of Each Disbursement this Period 9.46
City Washington State DC Zip Code 20006-3944		
Purpose of Disbursement Banking Fee Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	455.53
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 36 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. PNC Merchant Services		Transaction ID: D7059 Date of Disbursement
Mailing Address 6551 Coventry Way 2nd Floor		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Clinton	State MD	Zip Code 20735
Purpose of Disbursement Banking Fee	<input type="text" value="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:		
		Amount of Each Disbursement this Period <input type="text" value="1.00"/>

Full Name (Last, First, Middle Initial) B. PNC Merchant Services		Transaction ID: D7060 Date of Disbursement
Mailing Address 6551 Coventry Way 2nd Floor		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Clinton	State MD	Zip Code 20735
Purpose of Disbursement Banking Fee	<input type="text" value="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:		
		Amount of Each Disbursement this Period <input type="text" value="1.00"/>

Full Name (Last, First, Middle Initial) C. Ricoh		Transaction ID: D7010 Date of Disbursement
Mailing Address Post Office Box 13607		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Newark	State NJ	Zip Code 07188-0607
Purpose of Disbursement Office Equipment	<input type="text" value="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:		
		Amount of Each Disbursement this Period <input type="text" value="352.14"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="354.14"/>
TOTAL 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)

PAGE 37 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Ricoh		Transaction ID: D7011 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Post Office Box 13607		Amount of Each Disbursement this Period 105.43
City Newark State NJ Zip Code 07188-0607	Purpose of Disbursement Office Equipment Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ricoh		Transaction ID: D7012 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Post Office Box 13607		Amount of Each Disbursement this Period 245.16
City Newark State NJ Zip Code 07188-0607	Purpose of Disbursement Office Equipment Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ricoh		Transaction ID: D7013 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 13607		Amount of Each Disbursement this Period 244.80
City Newark State NJ Zip Code 07188-0607	Purpose of Disbursement Office Equipment Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	595.39
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 38 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Ronald Schneider		Transaction ID: D7056 Date of Disbursement 10 / 13 / 2006
Mailing Address 4616 Fessenden Street, N.W.		Amount of Each Disbursement this Period 326.17
City Washington State DC Zip Code 20016	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SL Green Management, LLC		Transaction ID: D7074 Date of Disbursement 10 / 12 / 2006
Mailing Address Building 420 Post Office Box 5162		Amount of Each Disbursement this Period 2027.25
City New York State NY Zip Code 10087-5162	Purpose of Disbursement Office Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: D7015 Date of Disbursement 10 / 05 / 2006
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 216.94
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2570.36
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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: D7016 Date of Disbursement 10 / 07 / 2006
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 71.00
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: D7017 Date of Disbursement 10 / 07 / 2006
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 70.68
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: D7018 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 60.98
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	202.66
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 40 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: D7019 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 123.69
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: D7020 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address Post Office Box 9368		Amount of Each Disbursement this Period 138.74
City Framingham State MA Zip Code 01702	Purpose of Disbursement Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

Full Name (Last, First, Middle Initial) C. Shradda Tewary		Transaction ID: D7077 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 2 Juliet Court		Amount of Each Disbursement this Period 275.45
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	537.88
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 41 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Regina Tierney		Transaction ID: D7104 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 23 Sparrow Bush Lane		Amount of Each Disbursement this Period 1122.00
City Milford State CT Zip Code 06460	Purpose of Disbursement Shipping Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: D7021 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 7247-0244		Amount of Each Disbursement this Period 52.58
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Shipping Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: D7023 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Post Office Box 64268		Amount of Each Disbursement this Period 31.67
City Baltimore State MD Zip Code 21264-4268	Purpose of Disbursement Telephone Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	1206.25
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: D7024 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 64268		Amount of Each Disbursement this Period 319.88
City Baltimore State MD Zip Code 21264-4268	Purpose of Disbursement Telephone Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D7022 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 17577		Amount of Each Disbursement this Period 409.60
City Baltimore State MD Zip Code 21297-0513	Purpose of Disbursement Telephone Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Samantha Wolf		Transaction ID: D7035 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1629 Columbia Road, N.W. Apartment 720		Amount of Each Disbursement this Period 259.38
City Washington State DC Zip Code 20019	Purpose of Disbursement Wages Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	988.86
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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Vennard Wright		Transaction ID: D7078 Date of Disbursement 10 / 13 / 2006
Mailing Address 6307 Hickory Road		Amount of Each Disbursement this Period 392.87
City Clinton State MD Zip Code 20735	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: D7105 Date of Disbursement 10 / 13 / 2006
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 7301.73
City Fairfax State VA Zip Code 22031	Purpose of Disbursement State/Federal Taxes: Items Below Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Comptroller of the Treasury		Transaction ID: D7066 Date of Disbursement 10 / 13 / 2006
Mailing Address Withholding Tax Section Income Tax Division		Amount of Each Disbursement this Period 29.60
City Annapolis State MD Zip Code 21411	Purpose of Disbursement State Tax Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	7694.60
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 44 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. DC Office of Tax and Revenue		Transaction ID: D7062 Date of Disbursement 10 / 13 / 2006
Mailing Address Ben Franklin Station Post Office Box 7792		Amount of Each Disbursement this Period 953.00
City Washington State DC Zip Code 20044	Purpose of Disbursement State Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Department of Employment Service		Transaction ID: D7067 Date of Disbursement 10 / 13 / 2006
Mailing Address Office of Unemployment Comp. Post Office Box 96664		Amount of Each Disbursement this Period 51.96
City Washington State DC Zip Code 20090-6664	Purpose of Disbursement State Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Internal Revenue Service		Transaction ID: D7061 Date of Disbursement 10 / 13 / 2006
Mailing Address Post Office Box 105703		Amount of Each Disbursement this Period 6095.03
City Atlanta State GA Zip Code 30348	Purpose of Disbursement Federal Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

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 45 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. New York State Employment Taxes		Transaction ID: D7064 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address Post Office Box 4119		Amount of Each Disbursement this Period 138.93
City Binghamton State NY Zip Code 13902-4119	[MEMO ITEM]	
Purpose of Disbursement State Tax Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Virginia Department of Taxation		Transaction ID: D7031 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address Post Office Box 27264		Amount of Each Disbursement this Period 28.13
City Richmond State VA Zip Code 23261-7264	[MEMO ITEM]	
Purpose of Disbursement State Tax Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: D7106 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period 2663.49
City Fairfax State VA Zip Code 22031	[MEMO ITEM]	
Purpose of Disbursement Employee Benefits: Item Below Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2663.49
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 46 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial)
A. Merrill Lynch

Mailing Address Post Office Box 44000

City State Zip Code
New Brunswick NJ 08906

Purpose of Disbursement
Employee Benefits

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: D7065
Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

2663.49

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

41400.83

**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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Arcuri for Congress		Transaction ID: D7080 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 8508		Amount of Each Disbursement this Period 5000.00
City Utica State NY Zip Code 13505	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Michael A. Arcuri		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ben Cardin for Senate		Transaction ID: D7088 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 21093		Amount of Each Disbursement this Period 5000.00
City Catonsville State MD Zip Code 21228	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Benjamin Cardin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Shea-Porter for Congress		Transaction ID: D7089 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 453		Amount of Each Disbursement this Period 2500.00
City Rochester State NH Zip Code 03866	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Carol Shea-Porter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Democratic Party of South Carolina		Transaction ID: D7112 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address Post Office Box 5965		Amount of Each Disbursement this Period 5000.00
City Columbia State SC Zip Code 29250	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) B. Democratic Party of Virginia		Transaction ID: D7113 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1108 East Main Street 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Richmond State VA Zip Code 23219	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	011 Category/ Type

Full Name (Last, First, Middle Initial) C. Democratic State Central Cmte of Maryland		Transaction ID: D7090 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 188 Main Street Suite 1		Amount of Each Disbursement this Period 5000.00
City Annapolis State MD Zip Code 21404	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	011 Category/ Type

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Friends of Dan Maffei		Transaction ID: D7093 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 74		Amount of Each Disbursement this Period 5000.00
City Syracuse	State NY Zip Code 13214	
Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Daniel Maffei		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 25		

Full Name (Last, First, Middle Initial) B. Friends of Stephen Harrison		Transaction ID: D7094 Date of Disbursement 10 / 16 / 2006
Mailing Address 544 Bay Ridge Parkway		Amount of Each Disbursement this Period 1000.00
City Brooklyn	State NY Zip Code 11209	
Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Stephen Harrison		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 13		

Full Name (Last, First, Middle Initial) C. Gillibrand for Congress		Transaction ID: D7073 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 1279		Amount of Each Disbursement this Period 5000.00
City Hudson	State NY Zip Code 12534	
Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Kirsten Gillibrand		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 20		

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Idaho Democratic Party		Transaction ID: D7095 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 445		Amount of Each Disbursement this Period 5000.00
City Boise	State ID Zip Code 83701	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District: F		

Full Name (Last, First, Middle Initial) B. John Hall for Congress		Transaction ID: D7097 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 377		Amount of Each Disbursement this Period 5000.00
City Dover Plains	State NY Zip Code 12522	
Purpose of Disbursement Contribution Candidate Name John Hall		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 19		

Full Name (Last, First, Middle Initial) C. Massa for Congress		Transaction ID: D7076 Date of Disbursement 10 / 16 / 2006
Mailing Address 60 East Market Street Suite 244		Amount of Each Disbursement this Period 5000.00
City Corning	State NY Zip Code 14830	
Purpose of Disbursement Contribution Candidate Name Eric Massa		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 29		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hill PAC

Full Name (Last, First, Middle Initial) A. Mejias for Congress		Transaction ID: D7098 Date of Disbursement 10 / 16 / 2006
Mailing Address 294 Main Street		Amount of Each Disbursement this Period 1000.00
City Farmingdale	State NY	
Zip Code 11735		
Purpose of Disbursement Contribution Candidate Name David Mejias Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Missouri Democratic State Committee		Transaction ID: D7108 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 719		Amount of Each Disbursement this Period 5000.00
City Jefferson City	State MO	
Zip Code 65102		
Purpose of Disbursement Contribution Candidate Name Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Montana Democratic Party		Transaction ID: D7109 Date of Disbursement 10 / 16 / 2006
Mailing Address Post Office Box 802		Amount of Each Disbursement this Period 5000.00
City Helena	State MT	
Zip Code 59624		
Purpose of Disbursement Contribution Candidate Name Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Nevada State Democratic Party		Transaction ID: D7099 Date of Disbursement 10 / 16 / 2006
Mailing Address 409 Horn Street		Amount of Each Disbursement this Period 5000.00
City Las Vegas	State NV Zip Code 89107	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	F	

Full Name (Last, First, Middle Initial) B. New Jersey Democratic State Committee		Transaction ID: D7100 Date of Disbursement 10 / 16 / 2006
Mailing Address 196 West State Street		Amount of Each Disbursement this Period 5000.00
City Trenton	State NJ Zip Code 08608	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	F	

Full Name (Last, First, Middle Initial) C. Ohio Democratic Party		Transaction ID: D7101 Date of Disbursement 10 / 16 / 2006
Mailing Address 271 East State Street		Amount of Each Disbursement this Period 5000.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	F	

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 57

<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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Paul Hodes for Congress		Transaction ID: D7102 Date of Disbursement
Mailing Address 26 South Main Street Number 253		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name Paul Hodes		<input type="text" value="2500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH	District: 2	

Full Name (Last, First, Middle Initial) B. Pennsylvania Democratic Party		Transaction ID: D7103 Date of Disbursement
Mailing Address 300 North Second Street 8th Floor		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Harrisburg	State PA	Zip Code 17101
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State:	District: F	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="87000.00"/>

**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 54 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
Hill PAC

Full Name (Last, First, Middle Initial) A. Vera Blinken		Transaction ID: D7083 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 435 East 52nd Street		Amount of Each Disbursement this Period 5000.00
City New York State NY Zip Code 10022	Purpose of Disbursement Refund 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) ▼	010 Category/Type

Full Name (Last, First, Middle Initial) B. International Union of Operating Engineers		Transaction ID: D7096 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address AFL- CIO State & Local PAC 265 West 14th Street, Room 505		Amount of Each Disbursement this Period 2000.00
City New York State NY Zip Code 10011-7103	Purpose of Disbursement Refund 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) ▼	010 Category/Type

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	7000.00

**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 55 / 57

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

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NAME OF COMMITTEE (In Full)
Hill PAC

Full Name (Last, First, Middle Initial) A. Emerge America		Transaction ID: D7092	
Mailing Address 131 Steuart Street Suite 300		Date of Disbursement 10 / 16 / 2006	
City San Francisco	State CA	Zip Code 94105	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution		012 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Other		

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Hill PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crossroad Strategies/Media Innovations, LLC	Nature of Debt (Purpose): Consulting/Website
Mailing Address 1510 Park Road NW Number 3	
City State ZIP Code Washington DC 20010	

Outstanding Balance Beginning This Period 4700.00	Transaction ID: D1795	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dragonfly	Nature of Debt (Purpose): Event Expense: Flowers
Mailing Address 30 South Quaker Lane Suite 100	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D7107	
Amount Incurred This Period 591.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 591.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Merkle Response Services	Nature of Debt (Purpose): Direct Mail
Mailing Address 13331 Pennsylvania Avenue	
City State ZIP Code Hagerstown MD 21742	

Outstanding Balance Beginning This Period 1700.00	Transaction ID: D4615	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

1) SUBTOTALS This Period This Page (optional).....	6991.58
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Hill PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software	Nature of Debt (Purpose): Consulting/Computers
Mailing Address 5505 Connecticut Avenue, N.W. Post Mail Box 277	
City State ZIP Code Washington DC 20015	

Outstanding Balance Beginning This Period 5600.64	Transaction ID: D3231	
Amount Incurred This Period 0.00	Payment This Period 196.88	Outstanding Balance at Close of This Period 5403.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Occasions Caterers	Nature of Debt (Purpose): Event Expense: Food & Beverage
Mailing Address 5458 3rd Street, N.E.	
City State ZIP Code Washington DC 20011	

Outstanding Balance Beginning This Period 10570.06	Transaction ID: D6330	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10570.06

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ryan Phillips Utrecht & MacKinnon	Nature of Debt (Purpose): Consulting/Legal
Mailing Address 1133 Connecticut Avenue, N.W. Suite 300	
City State ZIP Code Washington DC 20036	

Outstanding Balance Beginning This Period 20770.23	Transaction ID: D785	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20770.23

1) SUBTOTALS This Period This Page (optional).....	36744.05
2) TOTALS This Period (last page this line number only).....	43735.63
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	