

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines LONGHORN PAC

ADDRESS (number and street) PO Box 40385 Check if different than previously reported. (ACC) Washington DC 20016

2. FEC IDENTIFICATION NUMBER C00402602 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special Election on 11 07 2006 in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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

Type or Print Name of Treasurer Christopher J. Ward

Signature of Treasurer Electronically Filed by Christopher J. Ward Date 12 22 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
LONGHORN 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		264602.30
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	91431.83									
(c) Total Receipts (from Line 19) .....	42500.00	261200.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	133931.83	525802.30								
7. Total Disbursements (from Line 31) .....	82945.29	474815.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50986.54	50986.54								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
LONGHORN 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	2500.00	60750.00
(i) Itemized (use Schedule A) .....	0.00	1450.00
(ii) Unitemized .....	2500.00	62200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	35000.00	194000.00
(c) Other Political Committees (such as PACs) .....	37500.00	256200.00
(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) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	42500.00	261200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	42500.00	261200.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	14445.29	75860.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	14445.29	75860.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65500.00	395955.32
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	3000.00	3000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	82945.29	474815.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	82945.29	474815.76

**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) .....	37500.00	256200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	37500.00	256200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14445.29	75860.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14445.29	75860.44

**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 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Jonathan Potter		Date of Receipt MM / DD / YYYY 10 / 16 / 2006
Mailing Address 10440 Democracy Ln		<b>Transaction ID:</b> SA11A1.5193
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00	
Name of Employer Digital Media Associates	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Len Swinehart		Date of Receipt MM / DD / YYYY 10 / 16 / 2006
Mailing Address 3410 Martha Custis		<b>Transaction ID:</b> SA11A1.5195
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer Griffin Johnson Dover	Occupation Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Weil, Gotshal & Manges LLP		Date of Receipt MM / DD / YYYY 10 / 16 / 2006
Mailing Address 1300 Eye St, NW Suite 900		<b>Transaction ID:</b> SA11A1.5200
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation Partnership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

# 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 7 / 23
	<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1120 Connecticut Avenue NW		<b>Transaction ID: SA11C.5190</b>
City State Zip Code Washington DC 20036	FEC ID number of contributing federal political committee. <b>C</b> C00004275	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
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>B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 220 Leigh Farm Rd 201 Plaza III		<b>Transaction ID: SA11C.5212</b>
City State Zip Code Durham NC 27707	FEC ID number of contributing federal political committee. <b>C</b> C00077321	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Clear Channel Communications PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 200 E Basse Road		<b>Transaction ID: SA11C.5214</b>
City State Zip Code San Antonio TX 78209	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> 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 / 23
	<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Federal Express PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 942 S. Shady Grove Road		<b>Transaction ID:</b> SA11C.5211
City State Zip Code Memphis TN 38120	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Honeywell International PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 1001 Pennsylvania Avenue Suite 700		<b>Transaction ID:</b> SA11C.5210
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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>C.</b> HSBC NORTH AMERICA POLITICAL ACTION COMMITTEE (H-PAC)		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 2700 Sanders Road		<b>Transaction ID:</b> SA11C.5208
City State Zip Code Prospect Heights IL 60070	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00033423		
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> 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 / 23
	<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. INVITROGEN CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE</b>		Date of Receipt
Mailing Address 1455 Pennsylvania Avenue NW Suite #100		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11C.5187
C C00404442		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) <b>B. NACS POLITICAL ACTION COMMITTEE</b>		Date of Receipt
Mailing Address 1600 Duke Street		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City	State	Zip Code
Alexandria	VA	22314
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11C.5218
C C00126763		Amount of Each Receipt this Period
		2500.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL FRANCHISEE ASSOCIATION PAC (NFA-PAC)</b>		Date of Receipt
Mailing Address 1201 Roberts Boulevard Suite 100		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>
City	State	Zip Code
Kennesaw	GA	30144
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11C.5215
C C00329425		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8500.00</b>
<b>TOTAL</b> 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 / 23
	<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. Outback Steakhouse, Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 2202 N Westshore Blvd. Floor 5		<b>Transaction ID: SA11C.5207</b>
City Tampa      State FL      Zip Code 33607	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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>B. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 2600 South River Road		<b>Transaction ID: SA11C.5186</b>
City Des Plaines      State IL      Zip Code 60018	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00066472		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>C. Rely On Your Beliefs Fund</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 5412		<b>Transaction ID: SA11C.5185</b>
City Arlington      State VA      Zip Code 22205	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	9500.00
<b>TOTAL</b> 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 / 23
	<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. ROCHE INC. GOOD GOVERNMENT FUND</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 340 Kingsland Street		<b>Transaction ID: SA11C.5189</b>
City State Zip Code Nutley NJ 07110	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00072769		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) <b>B. VIACOM INTERNATIONAL INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 1501 M Street Suite 1100 NW		<b>Transaction ID: SA11C.5205</b>
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00167759		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Wal-mart Stores, Inc. PAC for Responsible Gov't</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 702 SW 8th Street		<b>Transaction ID: SA11C.5204</b>
City State Zip Code Bentonville AR 72716	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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 12 / 23
	(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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial)  
**A. WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

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

Transaction ID: SA11C.5197

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 23
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" 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)  
LONGHORN PAC

**A.** Full Name (Last, First, Middle Initial)  
MN-06 CONGRESSIONAL VICTORY COMMITTEE

Mailing Address PO BOX 40177

City State Zip Code  
WASHINGTON DC 20016

FEC ID number of contributing federal political committee. **C** C00421636

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

Transaction ID: SA16.5180

Amount of Each Receipt this Period  
5000.00

Refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

# 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)

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

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NAME OF COMMITTEE (In Full)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. Bistro Bis</b>		<b>Transaction ID:</b> SB21B.5126 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 15 E Street NW		Amount of Each Disbursement this Period 1277.00
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Catering Costs Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. Epiphany Productions</b>		<b>Transaction ID:</b> SB21B.5099 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 4500.00
City Alexandria State VA Zip Code 22301	[MEMO ITEM]	
Purpose of Disbursement Fundraising Consultant Fees Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Epiphany Productions</b>		<b>Transaction ID:</b> SB21B.5100 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 4765.76
City Alexandria State VA Zip Code 22301	[MEMO ITEM]	
Purpose of Disbursement Travel Reimbursement Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9265.76
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
LONGHORN PAC

**A. Epiphany Productions**

Full Name (Last, First, Middle Initial)  
Epiphany Productions

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Catering Costs (SEE MEMOS)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.5101

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

4679.53

Category/  
Type

**B. Political Compliance Services**

Full Name (Last, First, Middle Initial)  
Political Compliance Services

Mailing Address PO Box 373

City Fairfax Station State VA Zip Code 22039

Purpose of Disbursement  
Accounting and Compliance Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.5191

Date of Disbursement

10 / 17 / 2006

Amount of Each Disbursement this Period

500.00

Category/  
Type

**C. Splendid Fare Catering**

Full Name (Last, First, Middle Initial)  
Splendid Fare Catering

Mailing Address 1310 Braddock Place

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Catering Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.5125

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

1706.46

[MEMO ITEM]

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

5179.53

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. The Cypress Hotel</b>		Transaction ID: SB21B.5127	
Mailing Address 10050 S De Anza Blvd		Date of Disbursement 10 / 04 / 2006	
City Cupertino	State CA	Zip Code 95014	Amount of Each Disbursement this Period 1100.25
Purpose of Disbursement Catering Costs		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	14445.29



**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 17 / 23

<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. ADRIAN SMITH FOR CONGRESS</b>		<b>Transaction ID: SB23.5150</b> Date of Disbursement 10 / 02 / 2006	
Mailing Address 3321 AVENUE I SUITE 6		Amount of Each Disbursement this Period 5000.00	
City SCOTTSBLUFF	State NE		Zip Code 69361
Purpose of Disbursement			Category/ Type
Candidate Name ADRIAN SMITH FOR CONGRESS			
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: NE District: 03			

Full Name (Last, First, Middle Initial) <b>B. BACHMANN FOR CONGRESS</b>		<b>Transaction ID: SB23.5142</b> Date of Disbursement 10 / 02 / 2006	
Mailing Address BOX 49756		Amount of Each Disbursement this Period 4000.00	
City BLAINE	State MN		Zip Code 55449
Purpose of Disbursement			Category/ Type
Candidate Name BACHMANN FOR CONGRESS			
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: MN District: 06			

Full Name (Last, First, Middle Initial) <b>C. BILIRAKIS FOR CONGRESS</b>		<b>Transaction ID: SB23.5138</b> Date of Disbursement 10 / 02 / 2006	
Mailing Address 610 S BOULEVARD		Amount of Each Disbursement this Period 5000.00	
City TAMPA	State FL		Zip Code 33606
Purpose of Disbursement			Category/ Type
Candidate Name BILIRAKIS FOR CONGRESS			
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: FL District: 09			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 23

<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. CHRIS WAKIM FOR CONGRESS</b>		<b>Transaction ID: SB23.5148</b> Date of Disbursement 10 / 02 / 2006
Mailing Address PO Box 2176		Amount of Each Disbursement this Period 5000.00
City Wheeling	State WV Zip Code 26003	
Purpose of Disbursement		
Candidate Name CHRIS WAKIM FOR CONGRESS		
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: WV District: 01		

Full Name (Last, First, Middle Initial) <b>B. DAVID MCSWEENEY FOR CONGRESS 2006 INC</b>		<b>Transaction ID: SB23.5146</b> Date of Disbursement 10 / 02 / 2006
Mailing Address 8 Hubbell Court		Amount of Each Disbursement this Period 5000.00
City Barrington	State IL Zip Code 60010	
Purpose of Disbursement		
Candidate Name DAVID MCSWEENEY FOR CONGRESS 2006 INC		
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: IL District: 8		

Full Name (Last, First, Middle Initial) <b>C. GARD FOR CONGRESS</b>		<b>Transaction ID: SB23.5145</b> Date of Disbursement 10 / 02 / 2006
Mailing Address PO BOX 277		Amount of Each Disbursement this Period 4000.00
City GREEN BAY	State WI Zip Code 54305	
Purpose of Disbursement		
Candidate Name GARD FOR CONGRESS		
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: WI District: 08		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. JOHN T. DOOLITTLE FOR CONGRESS</b>		<b>Transaction ID: SB23.5137</b> Date of Disbursement 10 / 02 / 2006
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 5000.00
City SACRAMENTO State CA Zip Code 95833	Category/ Type	
Purpose of Disbursement		
Candidate Name JOHN T. DOOLITTLE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KUHL FOR CONGRESS</b>		<b>Transaction ID: SB23.5144</b> Date of Disbursement 10 / 02 / 2006
Mailing Address 10 GANESVOORT STREET SUITE 101		Amount of Each Disbursement this Period 5000.00
City BATH State NY Zip Code 14810	Category/ Type	
Purpose of Disbursement		
Candidate Name KUHL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LAMBERTI FOR CONGRESS</b>		<b>Transaction ID: SB23.5143</b> Date of Disbursement 10 / 02 / 2006
Mailing Address PO BOX 785		Amount of Each Disbursement this Period 2500.00
City ANKENY State IA Zip Code 50021	Category/ Type	
Purpose of Disbursement		
Candidate Name LAMBERTI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. MAC COLLINS FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.5141
Mailing Address P.O. Box 962		Date of Disbursement 10 / 02 / 2006
City Jackson	State GA	Zip Code 30233
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name MAC COLLINS FOR CONGRESS		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: GA	District: 08	

Full Name (Last, First, Middle Initial) <b>B. RAY MEIER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.5152
Mailing Address PO BOX 120		Date of Disbursement 10 / 02 / 2006
City UTICA	State NY	Zip Code 13503
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name RAY MEIER FOR CONGRESS COMMITTEE		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: 24	

Full Name (Last, First, Middle Initial) <b>C. SOUDER FOR CONGRESS INC.</b>		<b>Transaction ID:</b> SB23.5135
Mailing Address P.O. BOX 40233		Date of Disbursement 10 / 06 / 2006
City FORT WAYNE	State IN	Zip Code 46804
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name SOUDER FOR CONGRESS INC.		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: IN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. SWEENEY FOR CONGRESS INC</b>		<b>Transaction ID: SB23.5147</b>
Mailing Address Post Office Box 1465		Date of Disbursement 10 / 02 / 2006
City Clifton Park	State NY	Zip Code 12065
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name SWEENEY FOR CONGRESS INC		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: 20	

Full Name (Last, First, Middle Initial) <b>B. VERN BUCHANAN FOR CONGRESS</b>		<b>Transaction ID: SB23.5139</b>
Mailing Address P. O. Box 48928		Date of Disbursement 10 / 02 / 2006
City Sarasota	State FL	Zip Code 34230
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name VERN BUCHANAN FOR CONGRESS		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: FL	District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	65500.00

**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)

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<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)  
LONGHORN PAC

Full Name (Last, First, Middle Initial) <b>A. Asa Hutchinson for Governor</b>		<b>Transaction ID: SB29.5181</b>																					
Mailing Address 1501 N. Pierce Ste 102		Date of Disbursement																					
City Little Rock State AR Zip Code 72207		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	6	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	6	/	2	0	0	6														
Purpose of Disbursement State Candidate Contribution		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																			
500.00																							
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) ▼	Category/Type																					
State: District:																							

Full Name (Last, First, Middle Initial) <b>B. Judge Tom Rickoff Campaign</b>		<b>Transaction ID: SB29.5183</b>																					
Mailing Address 525 Moss Mount		Date of Disbursement																					
City San Antonio State TX Zip Code 78258		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	6	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	6	/	2	0	0	6														
Purpose of Disbursement State Candidate Contribution		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>2500.00</td> </tr> </table>		2500.00																			
2500.00																							
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) ▼	Category/Type																					
State: District:																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3000.00</b>

Image# 26930753190

Form/Schedule: **F3XA**

Transaction ID:

In response to your letter dated December 8 please note that amendments have been filed for the August Monthly report to show that the donations to Bachmann for Congress should have been split \$4000 for Primary and \$1000 for General and the April Monthly has been amended to show that the contribution to David McSweeney for Congress was for Primary Debt Retirement. Also, please note that all disbursements for Fundraising Consultant Fees and Catering Costs (SEE MEMOS) were for the benefit of the Committee and not for any specific candidates.

\*\*\*\*\*