

**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  
KB HOME AMERICAN DREAM PAC

ADDRESS (number and street) 520 S. GRAND AVE., #700  
 Check if different than previously reported. (ACC)  
LOS ANGELES CA 90071

2. **FEC IDENTIFICATION NUMBER** C00417139  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 01 01 2006 through 01 31 2006

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

Type or Print Name of Treasurer CARY DAVIDSON

Signature of Treasurer Electronically Filed by CARY DAVIDSON Date 03 16 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  
KB HOME AMERICAN DREAM PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="center">50000.00</td></tr></table>	50000.00
Y	Y	Y	Y									
2	0	0	6									
50000.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="center">50000.00</td></tr></table>	50000.00										
50000.00												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="center">80607.75</td></tr></table>	80607.75	<table border="1" style="width: 100%;"><tr><td align="center">80607.75</td></tr></table>	80607.75								
80607.75												
80607.75												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="center">130607.75</td></tr></table>	130607.75	<table border="1" style="width: 100%;"><tr><td align="center">130607.75</td></tr></table>	130607.75								
130607.75												
130607.75												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00								
0.00												
0.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="center">130607.75</td></tr></table>	130607.75	<table border="1" style="width: 100%;"><tr><td align="center">130607.75</td></tr></table>	130607.75								
130607.75												
130607.75												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
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  
KB HOME AMERICAN DREAM PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	80208.38	80208.38
(i) Itemized (use Schedule A) .....	399.37	399.37
(ii) Unitemized .....	80607.75	80607.75
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	80607.75	80607.75
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	80607.75	80607.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	80607.75	80607.75

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

**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) .....	80607.75	80607.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	80607.75	80607.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

**A.** Full Name (Last, First, Middle Initial)  
CHRIS G. APOSTOLOPOULOS

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 208.34

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

Transaction ID: INC:A:43

Amount of Each Receipt this Period  
104.17

**B.** Full Name (Last, First, Middle Initial)  
CHRIS G. APOSTOLOPOULOS

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 208.34

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

Transaction ID: INC:A:44

Amount of Each Receipt this Period  
104.17

**C.** Full Name (Last, First, Middle Initial)  
GLEN BARNARD

Mailing Address 4500 S. DOWNING ST.

City State Zip Code  
ENGLEWOOD CO 80113

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

Name of Employer Occupation  
KB HOME REGIONAL GENERAL MANAGER

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 5 / 2 0 0 6

Transaction ID: INC:A:19

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5208.34
<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 7 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

Full Name (Last, First, Middle Initial) <b>A. SUZANNE BERLINSKY</b>		Date of Receipt MM / DD / YYYY 01 / 13 / 2006
Mailing Address 4775 CANOE CREEK RD.		<b>Transaction ID: INC:A:20</b>
City SAINT CLOUD	State FL	Zip Code 34772
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
		Amount of Each Receipt this Period 1250.00

Full Name (Last, First, Middle Initial) <b>B. LEAH S.W. BRYANT</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2006
Mailing Address 1508 VIEW FIELD CT.		<b>Transaction ID: INC:A:27</b>
City HENDERSON	State NV	Zip Code 89012
FEC ID number of contributing federal political committee.	C	
Name of Employer KB HOME	Occupation CEO MORTGAGE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
		Amount of Each Receipt this Period 5000.00

Full Name (Last, First, Middle Initial) <b>C. RICHARD A. CARRUTHERS</b>		Date of Receipt MM / DD / YYYY 01 / 03 / 2006
Mailing Address 13013 LAKE ROPER CT.		<b>Transaction ID: INC:A:14</b>
City WINDERMERE	State FL	Zip Code 94786
FEC ID number of contributing federal political committee.	C	
Name of Employer KB HOME	Occupation REGIONAL PRES. - S. CENTRAL FLORIDA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
		Amount of Each Receipt this Period 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11250.00
<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 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

**A.** Full Name (Last, First, Middle Initial)  
SHERRI CRANDALL

Mailing Address 11974 EASTWICK CIRCLE

City State Zip Code  
CARMEL IN 46033

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

Name of Employer Occupation  
HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: INC:A:21

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
KYLE S. DAVISON

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
208.34

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

Transaction ID: INC:A:47

Amount of Each Receipt this Period  
104.17

**C.** Full Name (Last, First, Middle Initial)  
KYLE S. DAVISON

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
208.34

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

Transaction ID: INC:A:48

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5208.34**

**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 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

Full Name (Last, First, Middle Initial) <b>A. MARCIA DILLON</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6	
Mailing Address P.O. BOX 60483		<b>Transaction ID: INC:A:16</b>	
City PHOENIX	State AZ	Zip Code 85082	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer KB HOME	Occupation DIVISION PRESIDENT - NEW MEXICO		
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. THOMAS C. DIPRIMA</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6	
Mailing Address 41540 NONPAREIL DR.		<b>Transaction ID: INC:A:22</b>	
City PALMDALE	State CA	Zip Code 93551	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer KB HOME	Occupation DIVISION PRESIDENT - LA VENTURA		
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>C. ROBERT FREED</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6	
Mailing Address 10990 WILSHIRE BLVD		<b>Transaction ID: INC:A:50</b>	
City LOS ANGELES	State CA	Zip Code 90024	Amount of Each Receipt this Period 104.17
FEC ID number of contributing federal political committee. C			
Name of Employer KB HOME	Occupation REGIONAL GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.34		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10104.17
<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 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

**A.** Full Name (Last, First, Middle Initial)  
ROBERT FREED

Mailing Address 10990 WILSHIRE BLVD

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME REGIONAL GENERAL MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.34

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2006

Transaction ID: INC:A:51

Amount of Each Receipt this Period  
104.17

**B.** Full Name (Last, First, Middle Initial)  
STEPHAN M. GEORGE

Mailing Address 2219 HIGHLAND SPRINGS PL.

City State Zip Code  
LOUISVILLE KY 40245

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT - FT. MYERS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 03 / 2006

Transaction ID: INC:A:13

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
BONNIE L. GOODWIN

Mailing Address 6749 SE NORTH MARINA WAY

City State Zip Code  
STUART FL 34996

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

Name of Employer Occupation  
HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 03 / 2006

Transaction ID: INC:A:11

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10104.17
<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 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

Full Name (Last, First, Middle Initial) <b>A. BARRY G. GRANT</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 6	
Mailing Address 9212 S. LOST HILL DR.		<b>Transaction ID: INC:A:24</b>	
City State Zip Code LONE TREE CO 80124		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KB HOME		Occupation DIVISION PRESIDENT - COLORADO	
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. WILLIAM B. JONES</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6	
Mailing Address 10990 WILSHIRE BLVD.		<b>Transaction ID: INC:A:53</b>	
City State Zip Code LOS ANGELES CA 90024		Amount of Each Receipt this Period 104.17	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KB HOME		Occupation DIVISION PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.34	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B. JONES</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 10990 WILSHIRE BLVD.		<b>Transaction ID: INC:A:54</b>	
City State Zip Code LOS ANGELES CA 90024		Amount of Each Receipt this Period 104.17	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KB HOME		Occupation DIVISION PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.34	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5208.34
<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 12 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

**A.** Full Name (Last, First, Middle Initial)  
MARK KINSLEY

Mailing Address 5900 TINNIN RD., NW

City State Zip Code  
ALBUQUERQUE NM 87107

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT - MID ATLANTIC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 0 6

Transaction ID: INC:A:17

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
SARAH KUSNICK

Mailing Address 201 KUSS RD.

City State Zip Code  
DANVILLE CA 94526

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

Name of Employer Occupation  
HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 0 6

Transaction ID: INC:A:18

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
KEN A. LANGSTON

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.34

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

Transaction ID: INC:A:55

Amount of Each Receipt this Period  
104.17

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10104.17
<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 13 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

**A.** Full Name (Last, First, Middle Initial)  
KEN A. LANGSTON

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.34

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

Transaction ID: INC:A:56

Amount of Each Receipt this Period  
104.17

**B.** Full Name (Last, First, Middle Initial)  
SCOTT B. LAURIE

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.34

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

Transaction ID: INC:A:57

Amount of Each Receipt this Period  
104.17

**C.** Full Name (Last, First, Middle Initial)  
SCOTT B. LAURIE

Mailing Address 10990 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.34

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

Transaction ID: INC:A:58

Amount of Each Receipt this Period  
104.17

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	312.51
<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 14 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

Full Name (Last, First, Middle Initial) <b>A. RON MILLICAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6	
Mailing Address 15 RIVERBANKS COURT		<b>Transaction ID: INC:A:15</b>	
City GREER	State SC	Zip Code 29651	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer KB HOME	Occupation EXECUTIVE V.P. - SC-GREENVILLE		
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. JAY MOSS</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 6	
Mailing Address 10990 WILSHIRE BLVD.		<b>Transaction ID: INC:A:61</b>	
City LOS ANGELES	State CA	Zip Code 90024	Amount of Each Receipt this Period 104.17
FEC ID number of contributing federal political committee. C			
Name of Employer KB HOME	Occupation REGIONAL GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.34		

Full Name (Last, First, Middle Initial) <b>C. JAY MOSS</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 10990 WILSHIRE BLVD.		<b>Transaction ID: INC:A:62</b>	
City LOS ANGELES	State CA	Zip Code 90024	Amount of Each Receipt this Period 104.17
FEC ID number of contributing federal political committee. C			
Name of Employer KB HOME	Occupation REGIONAL GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.34		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2708.34
<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 15 / 17
	<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)  
KB HOME AMERICAN DREAM PAC

Full Name (Last, First, Middle Initial) <b>A. GARY A. RAY</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 16697 CUMBRE VERDE CT.		<b>Transaction ID: INC:A:25</b>	
City State Zip Code PACIFIC PALISADES CA 90272	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KB HOME	Occupation SENIOR VICE PRESIDENT HUMAN RESOURCES		
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. MARK D. RODOCKER</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 6	
Mailing Address 1557 E. PROGRESS CIRCLE		<b>Transaction ID: INC:A:12</b>	
City State Zip Code CENTENNIAL CO 80015	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KB HOME	Occupation DIVISION PRESIDENT - ILLINOIS		
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>C. FREDERICK R. VANDERCOOK</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6	
Mailing Address 10126 OXFORD LANDING LN.		<b>Transaction ID: INC:A:23</b>	
City State Zip Code CHARLOTTE NC 28270	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KB HOME	Occupation DIVISION PRESIDENT - CHARLOTTE		
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) ..... ▶	15000.00
<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 16 / 17	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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)  
KB HOME AMERICAN DREAM PAC

**A.** Full Name (Last, First, Middle Initial)  
CRAIG WESTMORELAND

Mailing Address 142 TURNBERRY WAY

City State Zip Code  
SAN ANTONIO TX 78230

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

Name of Employer Occupation  
KB HOME DIVISION PRESIDENT - SAN ANTONIO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

Transaction ID: INC:A:26

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	80208.38



Image# 26920010313

Form/Schedule: **F3XA**      ADDING ITEMIZED CONTRIBUTIONS

Transaction ID:

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