

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Restore America PAC, Inc.

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
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| 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 | | 107749.22 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 149286.61 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 54710.09 | 356719.99 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 203996.70 | 464469.21 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 148002.16 | 408474.67 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 55994.54 | 55994.54 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Restore America PAC, Inc.

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 | 16350.00 | 192683.71 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 33360.09 | 50543.28 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 49710.09 | 243226.99 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 5000.00 | 96493.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 54710.09 | 339719.99 |
| 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 | 17000.00 |
| 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)) | 54710.09 | 356719.99 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 54710.09 | 356719.99 |

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..... | 47502.16 | 214828.46 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 47502.16 | 214828.46 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 75000.00 | 111000.00 |
| 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 | 2646.21 |
| (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 | 2646.21 |
| 29. Other Disbursements..... | 25500.00 | 80000.00 |
| 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)).. | 148002.16 | 408474.67 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 148002.16 | 408474.67 |

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) | 54710.09 | 339719.99 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 2646.21 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 54710.09 | 337073.78 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 47502.16 | 214828.46 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 47502.16 | 214828.46 |

**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 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Lois Crantz

Mailing Address 617 Terra California Dr Apt 6

City State Zip Code
Walnut Creek CA 94595-3343

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00

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

Transaction ID: 61025.C2482

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lois Crantz

Mailing Address 617 Terra California Dr Apt 6

City State Zip Code
Walnut Creek CA 94595-3343

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

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

Transaction ID: 61025.C2481

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Marjorie Davis

Mailing Address 6 Huckleberry Ln

City State Zip Code
Augusta ME 04330-6022

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

Name of Employer Occupation
Retired Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

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

Transaction ID: 61025.C2694

Amount of Each Receipt this Period
150.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 300.00 |
| 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 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Elene Green

Mailing Address PO Box 814

City State Zip Code
Gruver TX 79040-0814

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2006

Transaction ID: 61025.C1717

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas S. Monaghan

Mailing Address 10047 Gulf Shore Dr.

City State Zip Code
Naples FL 34108

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

Name of Employer Occupation
Ave Maria Foundation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3872.21

Date of Receipt
MM / DD / YYYY
10 / 01 / 2006

Transaction ID: 61020.C1660

Amount of Each Receipt this Period
3872.21

In-Kind

Event Expenses

C. Full Name (Last, First, Middle Initial)
Thomas S. Monaghan

Mailing Address 10047 Gulf Shore Dr.

City State Zip Code
Naples FL 34108

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

Name of Employer Occupation
Ave Maria Foundation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2006

Transaction ID: 61020.C1661

Amount of Each Receipt this Period
1127.79

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 5100.00 |
| 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 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Wiley Rein & Fielding LLP

Mailing Address 1776 K Street, N.W.

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

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 / 1 4 / 2 0 0 6

Transaction ID: 61020.C1662

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
David Koch

Mailing Address 1776 K Street N.W.

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
Wiley Rein & Fielding LLP Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

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

Transaction ID: 61020.C1663

Amount of Each Receipt this Period
200.00

Memo

[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

C. Full Name (Last, First, Middle Initial)
David Kulik

Mailing Address 1776 K Street N.W.

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
Wiley Rein & Fielding LLP Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

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

Transaction ID: 61020.C1664

Amount of Each Receipt this Period
200.00

Memo

[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
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| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Carol Laham

Mailing Address 1776 K Street N.W.

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
Wiley Rein & Fielding LLP Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: 61020.C1665

Amount of Each Receipt this Period
200.00

Memo
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

B. Full Name (Last, First, Middle Initial)
Andrew McBride

Mailing Address 1776 K Street N.W.

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
Wiley Rein & Fielding LLP Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: 61020.C1666

Amount of Each Receipt this Period
200.00

Memo
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

C. Full Name (Last, First, Middle Initial)
Scott McCaleb

Mailing Address 1776 K Street N.W.

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
Wiley Rein & Fielding LLP Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: 61020.C1667

Amount of Each Receipt this Period
200.00

Memo
[MEMO ITEM]
Partnership->Wiley Rein & Fielding LLP

| | | |
|--|---|------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 0.00 |
| 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 / 33 |
| | <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"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
James Heather

Mailing Address 10095 Creek Trail Cir

City State Zip Code
Stockton CA 95209-1710

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

Name of Employer
Heather, Sanguineth, Caminata &

Occupation
CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2006

Transaction ID: 61025.C1702

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Elizabeth Cochran

Mailing Address 459 Passaic Ave

City State Zip Code
West Caldwell NJ 07006-7457

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

Name of Employer

Occupation
Ret

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2006

Transaction ID: 61025.C1709

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edward S Martin

Mailing Address 1046 Woodberry Rd

City State Zip Code
New Kensington PA 15068-5308

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

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2006

Transaction ID: 61025.C1757

Amount of Each Receipt this Period
200.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 950.00 |
| 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 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Bernard A Zarda

Mailing Address 18404 W 66th Ter

City State Zip Code
Shawnee KS 66218-9529

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

Name of Employer Occupation
Self Employee Industrial Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: 61025.C1789

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
William J Winsinger

Mailing Address 2432 Buckskin Rd

City State Zip Code
Moundridge KS 67107-7420

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: 61025.C1872

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
L.E. McClellan

Mailing Address PO Box 310

City State Zip Code
Lancaster OH 43130-0310

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

Name of Employer Occupation
Cyclcy - Scott G. Office

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: 61025.C2107

Amount of Each Receipt this Period
1000.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1700.00 |
| 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 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Thomas J Kelly

Mailing Address 5211 Arquilla Dr

City State Zip Code
Richton Park IL 60471-1519

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

Name of Employer Occupation
Governors State University Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID: 61025.C2342

Amount of Each Receipt this Period
2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Louis Rehak

Mailing Address 13779 Lakeside Dr

City State Zip Code
Clarksville MD 21029-1346

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

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

Transaction ID: 61025.C2398

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lunsford Richardson

Mailing Address 7 Indian Spring Rd

City State Zip Code
Norwalk CT 06853-1304

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

Name of Employer Occupation
Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

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

Transaction ID: 61025.C2423

Amount of Each Receipt this Period
500.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2700.00 |
| 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 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Rawleigh Warner

Mailing Address 40 Wall St Fl 62

City State Zip Code
New York NY 10005-1306

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: 61025.C2449

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Richard F Harris

Mailing Address 7 Lorriellake Ln

City State Zip Code
Houston TX 77024-7119

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: 61025.C2524

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
J Jerald Branson

Mailing Address 7373 E 29th St N
Larksfield Pl W105

City State Zip Code
Wichita KS 67226-3405

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 61025.C2634

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 700.00 |
| 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 14 / 33 |
| | <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)
Restore America PAC, Inc.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. J Jerald Branson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 7373 E 29th St N Larksfield PI W105 | | Transaction ID: 61025.C2632 |
| City State Zip Code Wichita KS 67226-3405 | Amount of Each Receipt this Period 150.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt |
| Name of Employer Occupation Retired | Aggregate Year-to-Date ▼ 400.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. J Jerald Branson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 7373 E 29th St N Larksfield PI W105 | | Transaction ID: 61025.C2633 |
| City State Zip Code Wichita KS 67226-3405 | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt |
| Name of Employer Occupation Retired | Aggregate Year-to-Date ▼ 600.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Frances Cheney | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 676 N Main St | | Transaction ID: 61025.C2686 |
| City State Zip Code Centerville UT 84014-1813 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | Receipt |
| Name of Employer Occupation Retired | 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) ▶ | 1350.00 |
| 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 15 / 33 |
| | <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Elton Bennett

Mailing Address 111 Seminola Blvd

City State Zip Code
Casselberry FL 32707-3047

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 ▼ 300.00

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

Transaction ID: 61025.C2768

Amount of Each Receipt this Period
300.00

Receipt

B. Full Name (Last, First, Middle Initial)
Elliot A. Baines

Mailing Address 360 Indian Harbor Rd

City State Zip Code
Vero Beach FL 32963-3509

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 61025.C2795

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Dick Muller

Mailing Address 505 S 93rd Ave

City State Zip Code
Omaha NE 68114-5015

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

Name of Employer Broadmoor Financial Services Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 61025.C2875

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1550.00 |
| 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 16 / 33 |
| | <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)
Restore America PAC, Inc.

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. James B Townsend | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 6 | |
| Mailing Address 2938 Dimrill Stair | | Transaction ID: 61025.C2898 | |
| City State Zip Code Manhattan KS 66503-3026 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | Receipt | | |
| Name of Employer Occupation Retired Retired | Aggregate Year-to-Date ▼ 300.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Gaston Cellette | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 3355 Central Ave NE | | Transaction ID: 61025.C2916 | |
| City State Zip Code Minneapolis MN 55418-1217 | Amount of Each Receipt this Period 200.00 | | |
| FEC ID number of contributing federal political committee. C | Receipt | | |
| Name of Employer Occupation Retired Retired | Aggregate Year-to-Date ▼ 200.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Edmund F Bacas | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6 | |
| Mailing Address 355 Pelham Rd Apt 203 | | Transaction ID: 70103.C4664 | |
| City State Zip Code New Rochelle NY 10805-2264 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | Receipt | | |
| Name of Employer Occupation Retired Retired | Aggregate Year-to-Date ▼ 500.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) ▶ | 16350.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 17 / 33 |
| | (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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
AT&T Inc. Federal PAC

Mailing Address 175 E. Houston
Room 7-A-50

City San Antonio State TX Zip Code 78205

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

Name of Employer Occupation

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 / 1 2 / 2 0 0 6

Transaction ID: 61020.C1658

Amount of Each Receipt this Period
5000.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 5000.00 |
| TOTAL 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)

PAGE 18 / 33

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust | | Transaction ID: 61010.E935 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 3100 S Topeka Ave | | Amount of Each Disbursement this Period 3942.47 |
| City Topeka State KS Zip Code 66611- | Purpose of Disbursement CREDIT CARD; SEE BELOW 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) ▼ | CREDIT CARD; SEE BELOW |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Delta Airlines | | Transaction ID: 61010.E938 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address P.O. Box | | Amount of Each Disbursement this Period 2.50 |
| City State Zip Code - | Purpose of Disbursement TRAVEL EXPENSE 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] MEMO: TRAVEL EXPENSE |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Greenbrier Hotel | | Transaction ID: 61010.E939 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 300 W. Main St. | | Amount of Each Disbursement this Period 3577.93 |
| City White Sulphur Spgs State WV Zip Code 24986- | Purpose of Disbursement MEETING EXPENSE 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] MEMO: MEETING EXPENSE |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3942.47 |
| 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 19 / 33

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Cato Travel | | Transaction ID: 61010.E937 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 1st Centre Sts. N.E. | | Amount of Each Disbursement this Period 40.00 |
| City Washington State DC Zip Code 20001- | Purpose of Disbursement TRAVEL EXPENSE Candidate Name 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) ▼ | [MEMO ITEM] MEMO: TRAVEL EXPENSE |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. US Airways | | Transaction ID: 61010.E940 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 4000 E. Sky Harbor Blvd. | | Amount of Each Disbursement this Period 219.30 |
| City Phoenix State AZ Zip Code 85034- | Purpose of Disbursement TRAVEL EXPENSE Candidate Name 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) ▼ | [MEMO ITEM] MEMO: TRAVEL EXPENSE |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Oceanaire Washington | | Transaction ID: 61010.E936 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 1201 F Street NW | | Amount of Each Disbursement this Period 102.74 |
| City Washington State DC Zip Code 20004- | Purpose of Disbursement MEETING EXPENSE Candidate Name 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) ▼ | [MEMO ITEM] MEMO: MEETING EXPENSE |

| | |
|--|------|
| 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 20 / 33

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Kansas Air Center, Inc. | | Transaction ID: 61010.E930 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 5490 Ft. Riley Blvd. | | Amount of Each Disbursement this Period 1023.82 |
| City Manhattan State KS Zip Code 66502- | Purpose of Disbursement TRAVEL EXPENSE 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) ▼ | TRAVEL EXPENSE |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Thomas S. Monaghan | | Transaction ID: 61020.C1660IK Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6 |
| Mailing Address 10047 Gulf Shore Dr. | | Amount of Each Disbursement this Period 3872.21 |
| City Naples State FL Zip Code 34108- | Purpose of Disbursement EVENT EXPENSES 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) ▼ | IN KIND: EVENT EXPENSES |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Kevin S. McGuiness | | Transaction ID: 61020.E959 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 4310 North 38th St. | | Amount of Each Disbursement this Period 236.01 |
| City Arlington State VA Zip Code 22207- | Purpose of Disbursement MEETING EXPENSE 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) ▼ | MEETING EXPENSE |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5132.04 |
| 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)
Restore America PAC, Inc.

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. The Perfect Event, LLC | | Transaction ID: 61010.E928 Date of Disbursement |
| Mailing Address 1400 East-West Highway, #1220 | | <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 Silver Spring | State MD | Zip Code 20910- |
| Purpose of Disbursement FUND RAISING INVITATIONS | <input type="text" value="1260.00"/> | |
| 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: | FUND RAISING INVITATIONS | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. STMP | | Transaction ID: 61021.E962 Date of Disbursement |
| Mailing Address 13755 Sunrise Valley Drive Suite 450 | | <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> |
| City Herndon | State VA | Zip Code 20171- |
| Purpose of Disbursement MAILING EXPENSE | <input type="text" value="17353.99"/> | |
| 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: | MAILING EXPENSE | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Ryan T. Carney | | Transaction ID: 61010.E926 Date of Disbursement |
| Mailing Address 2001 North Adams Street #940 | | <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 Arlington | State VA | Zip Code 22201- |
| Purpose of Disbursement TRAVEL & MEETING REIMBURSEMENT | <input type="text" value="1212.56"/> | |
| 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: | TRAVEL & MEETING REIMBURSEMENT | |

| | |
|--|---------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="19826.55"/> |
| 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 22 / 33

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | |
|--|------------------------|---|
| Full Name (Last, First, Middle Initial) A. Commerce Bank & Trust | | Transaction ID: 61010.E931 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 3100 S Topeka Ave | | Amount of Each Disbursement this Period 1333.22 |
| City Topeka State KS Zip Code 66611- | CREDIT CARD: SEE BELOW | |
| Purpose of Disbursement CREDIT CARD: SEE BELOW | | Category/ Type |
| 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. United Airlines | | Transaction ID: 61010.E932 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 20 N. Wacker, Suite 1728 | | Amount of Each Disbursement this Period 1280.14 |
| City Chicago State IL Zip Code 60606- | [MEMO ITEM] MEMO: TRAVEL | |
| Purpose of Disbursement TRAVEL | | Category/ Type |
| 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. Cato Travel | | Transaction ID: 61010.E933 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 1st Centre Sts. N.E. | | Amount of Each Disbursement this Period 20.00 |
| City Washington State DC Zip Code 20001- | [MEMO ITEM] MEMO: TRAVEL EXPENSE | |
| Purpose of Disbursement TRAVEL EXPENSE | | Category/ Type |
| 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) ▶ | 1333.22 |
| 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 23 / 33

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Anne Holmes | | Transaction ID: 61010.E929 Date of Disbursement 10 / 03 / 2006 | |
| Mailing Address 3800 N. Fairfax Drive #507 | | Amount of Each Disbursement this Period 717.51 | |
| City Arlington State VA Zip Code 22203- | Purpose of Disbursement MEETING EXPENSE Candidate Name 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) ▼ | | |

MEETING EXPENSE

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. STMP | | Transaction ID: 61021.E961 Date of Disbursement 10 / 12 / 2006 | |
| Mailing Address 13755 Sunrise Valley Drive Suite 450 | | Amount of Each Disbursement this Period 6833.33 | |
| City Herndon State VA Zip Code 20171- | Purpose of Disbursement MAILING EXPENSE Candidate Name 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) ▼ | | |

MAILING EXPENSE

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Kansas Air Center, Inc. | | Transaction ID: 61020.E947 Date of Disbursement 10 / 11 / 2006 | |
| Mailing Address 5490 Ft. Riley Blvd. | | Amount of Each Disbursement this Period 1764.67 | |
| City Manhattan State KS Zip Code 66502- | Purpose of Disbursement TRAVEL EXPENSE Candidate Name 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) ▼ | | |

TRAVEL EXPENSE

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 9315.51 |
| 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 24 / 33

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. George Stafford | | Transaction ID: 61010.E925 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 8215 Dearborn | | Amount of Each Disbursement this Period 1005.14 | |
| City Shawnee Mission State KS Zip Code 66208- | Purpose of Disbursement TRAVEL REIMBURSEMENT | 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) ▼ | TRAVEL REIMBURSEMENT | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ryan T. Carney | | Transaction ID: 61020.E957 Date of Disbursement 10 / 16 / 2006 | |
| Mailing Address 2001 North Adams Street #940 | | Amount of Each Disbursement this Period 691.32 | |
| City Arlington State VA Zip Code 22201- | Purpose of Disbursement MEETING EXPENSE REIMBURSEMENT | 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) ▼ | MEETING EXPENSE REIMBURSEMENT | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ryan T. Carney | | Transaction ID: 61010.E927 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 2001 North Adams Street #940 | | Amount of Each Disbursement this Period 1588.06 | |
| City Arlington State VA Zip Code 22201- | Purpose of Disbursement TRAVEL & MEETING REIMBURSEMENT | 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) ▼ | TRAVEL & MEETING REIMBURSEMENT | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3284.52 |
| 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 25 / 33

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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)
Restore America PAC, Inc.

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ryan T. Carney | | Transaction ID: 61020.E948 Date of Disbursement 10 / 11 / 2006 | |
| Mailing Address 2001 North Adams Street #940 | | Amount of Each Disbursement this Period 4583.33 | |
| City Arlington | State VA | Zip Code 22201- | Category/ Type FUNDRAISING FEE |
| Purpose of Disbursement FUNDRAISING 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) ▼ | | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4583.33 |
| TOTAL This Period (last page this line number only) | 47417.64 |

**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)
Restore America PAC, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Santorum 2006 | | Transaction ID: 61010.E920 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address One Tower Bridge Suite 1440 | | Amount of Each Disbursement this Period 5000.00 |
| City Conshohocken State PA Zip Code 19428- | Purpose of Disbursement 2006 GENERAL ELECTION | |
| Candidate Name RICHARD J SANTORUM | | Category/Type 2006 GENERAL ELECTION |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Conrad Burns | | Transaction ID: 61010.E909 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address P.O. Box 1596 | | Amount of Each Disbursement this Period 5000.00 |
| City Helena State MT Zip Code 59624- | Purpose of Disbursement 2006 GENERAL ELECTION | |
| Candidate Name CONRAD BURNS | | Category/Type 2006 GENERAL ELECTION |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Chabot For Congress | | Transaction ID: 61010.E910 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address 3341 Harrison Avenue | | Amount of Each Disbursement this Period 5000.00 |
| City Cincinnati State OH Zip Code 45211- | Purpose of Disbursement 2006 GENERAL ELECTION | |
| Candidate Name STEVE CHABOT | | Category/Type 2006 GENERAL ELECTION |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| 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)

PAGE 27 / 33

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Jim Ryun for Congress | | Transaction ID: 61010.E919 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address P.O. Box 826 | | Amount of Each Disbursement this Period 5000.00 | |
| City Topeka | State KS | | Category/ Type |
| Zip Code 66601- | | | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | | |
| Candidate Name JIM R RYUN | | 2006 GENERAL ELECTION | |
| 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: KS District: 02 | | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Lamberti For Congress | | Transaction ID: 61010.E915 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address P.O. Box 785 | | Amount of Each Disbursement this Period 5000.00 | |
| City Ankeny | State IA | | Category/ Type |
| Zip Code 50021- | | | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | | |
| Candidate Name JEFFREY LAMBERTI | | 2006 GENERAL ELECTION | |
| 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: IA District: 3 | | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Rod Grams For Congress | | Transaction ID: 61010.E923 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address P.O. Box 15128 | | Amount of Each Disbursement this Period 1000.00 | |
| City Duluth | State MN | | Category/ Type |
| Zip Code 55815- | | | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | | |
| Candidate Name RODNEY DWIGHT GRAMS | | 2006 GENERAL ELECTION | |
| 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: 08 | | | |

| | |
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| 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)

PAGE 28 / 33

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | | |
|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Bob Corker For Senate, Inc. | | Transaction ID: 61010.E911 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address P.O. Box 848 | | Amount of Each Disbursement this Period 5000.00 | |
| City Chattanooga | State TN | Zip Code 37401- | Category/ Type 2006 GENERAL ELECTION |
| Purpose of Disbursement 2006 GENERAL ELECTION | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name ROBERT P CORKER JR | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | State: TN District: 00 | | |

| | | | |
|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Mike Bouchard For U.S. Senate | | Transaction ID: 61010.E908 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address P.O. Box 159 | | Amount of Each Disbursement this Period 5000.00 | |
| City Royal Oak | State MI | Zip Code 48068- | Category/ Type 2006 GENERAL ELECTION |
| Purpose of Disbursement 2006 GENERAL ELECTION | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name MICHAEL J BOUCHARD | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | State: MI District: 00 | | |

| | | | |
|--|------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Tom Kean For U.S. Senate | | Transaction ID: 61010.E914 Date of Disbursement 10 / 02 / 2006 | |
| Mailing Address 187 Mill Lane | | Amount of Each Disbursement this Period 5000.00 | |
| City Mountainside | State NJ | Zip Code 07092- | Category/ Type 2006 GENERAL ELECTION |
| Purpose of Disbursement 2006 GENERAL ELECTION | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name THOMAS H JR KEAN | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | State: NJ District: 00 | | |

| | |
|--|-------------|
| 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)

PAGE 29 / 33

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Mike DeWine For US Senate | | Transaction ID: 61010.E912 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address P.O. Box 340188 | | Amount of Each Disbursement this Period 5000.00 |
| City Columbus State OH Zip Code 43234- | Category/ Type 2006 GENERAL ELECTION | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | |
| Candidate Name RICHARD MICHAEL DEWINE | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Friends of George Allen | | Transaction ID: 61010.E924 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address P.O. box 6859 | | Amount of Each Disbursement this Period 2000.00 |
| City Arlington State VA Zip Code 22206- | Category/ Type 2006 GENERAL | |
| Purpose of Disbursement 2006 GENERAL | | |
| Candidate Name GEORGE ALLEN | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Friends of Katherine Harris | | Transaction ID: 61010.E913 Date of Disbursement 10 / 02 / 2006 |
| Mailing Address P.O. Box 25397 | | Amount of Each Disbursement this Period 2000.00 |
| City Tampa State FL Zip Code 33623- | Category/ Type 2006 GENERAL ELECTION | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | |
| Candidate Name KATHERINE HARRIS | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 9000.00 |
| 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 30 / 33

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Restore America PAC, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Steele For Maryland, Inc | | Transaction ID: 61010.E921 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address P.O. Box 347 | | Amount of Each Disbursement this Period 5000.00 |
| City Annapolis State MD Zip Code 21404- | Category/ Type 2006 GENERAL ELECTION | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | |
| Candidate Name MICHAEL STEELE | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. National Republican Senatorial Committee | | Transaction ID: 61010.E918 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address 425 2nd Avenue, NE | | Amount of Each Disbursement this Period 15000.00 |
| City Washington State DC Zip Code 20002- | Category/ Type 2006 GENERAL | |
| Purpose of Disbursement 2006 GENERAL | | |
| 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Talent for Senate | | Transaction ID: 61010.E922 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address 147 N. Meramec Suite 100 | | Amount of Each Disbursement this Period 5000.00 |
| City Saint Louis State MO Zip Code 63105- | Category/ Type 2006 GENERAL ELECTION | |
| Purpose of Disbursement 2006 GENERAL ELECTION | | |
| Candidate Name JAMES MATTHES TALENT | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 25000.00 |
| TOTAL This Period (last page this line number only) ▶ | 75000.00 |

**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 31 / 33

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)
Restore America PAC, Inc.

| | | | |
|--|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Kline For Attorney General | | Transaction ID: 61020.E955 Date of Disbursement 10 / 12 / 2006 | |
| Mailing Address P.O. Box 4026 | | Amount of Each Disbursement this Period 2000.00 | |
| City Topeka | State KS | Zip Code 66604- | Category/ Type |
| Purpose of Disbursement 2006 GENERAL | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|--|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Willard For State Board of Education | | Transaction ID: 61020.E953 Date of Disbursement 10 / 12 / 2006 | |
| Mailing Address 4300 Syppglass Drive | | Amount of Each Disbursement this Period 500.00 | |
| City Hutchinson | State KS | Zip Code 67502- | Category/ Type |
| Purpose of Disbursement 2006 GENERAL | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|--|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Carolinians For Change | | Transaction ID: 61020.E950 Date of Disbursement 10 / 12 / 2006 | |
| Mailing Address P.O. Box 841 | | Amount of Each Disbursement this Period 3500.00 | |
| City Sullivans Island | State SC | Zip Code 29482- | Category/ Type |
| Purpose of Disbursement 2006 CONTRIBUTION | | Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6000.00 |
| 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)

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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)
Restore America PAC, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Horst For Representative | | Transaction ID: 61020.E954 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 629 Arrowhead Lane | | Amount of Each Disbursement this Period 500.00 |
| City Salina State KS Zip Code 67401- | Purpose of Disbursement 2006 GENERAL 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. OMalley For Representative | | Transaction ID: 61020.E952 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 4804 W. 57th St. | | Amount of Each Disbursement this Period 500.00 |
| City Shawnee Mission State KS Zip Code 66205- | Purpose of Disbursement 2006 GENERAL 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Yoder For Representative | | Transaction ID: 61020.E951 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 |
| Mailing Address 5817 W. 100th Terr. | | Amount of Each Disbursement this Period 500.00 |
| City Shawnee Mission State KS Zip Code 66207- | Purpose of Disbursement 2006 GENERAL 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1500.00 |
| 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 33 / 33

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)
Restore America PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Kansas Republican Victory Fund PAC

Mailing Address P.O. Box 626

City Topeka State KS Zip Code 66601-0626

Purpose of Disbursement
2006 GENERAL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61020.E956

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

18000.00

SUBTOTAL of Disbursements This Page (optional)

18000.00

TOTAL This Period (last page this line number only)

25500.00