

# 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  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1050 CONNECTICUT AVE NW STE 1100  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00368142  
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 06 01 2006 through 06 30 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 William Schweitzer

Signature of Treasurer Electronically Filed by William Schweitzer Date 09 27 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  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

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

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

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

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

|                                                                                                                                                                                                                         | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand<br>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 |  | 9558.19 |
| Y                                                                                                                                                                                                                       | Y                       | Y                                 | Y |   |   |   |   |   |  |         |
| 2                                                                                                                                                                                                                       | 0                       | 0                                 | 6 |   |   |   |   |   |  |         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....                                                                                                                                                              | 95158.38                |                                   |   |   |   |   |   |   |  |         |
| (c) Total Receipts (from Line 19) .....                                                                                                                                                                                 | 0.00                    | 169600.19                         |   |   |   |   |   |   |  |         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....                                                                                                                    | 95158.38                | 179158.38                         |   |   |   |   |   |   |  |         |
| 7. Total Disbursements (from Line 31) .....                                                                                                                                                                             | 53636.00                | 137636.00                         |   |   |   |   |   |   |  |         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                                                                                                                               | 41522.38                | 41522.38                          |   |   |   |   |   |   |  |         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                                                                         | 0.00                    |                                   |   |   |   |   |   |   |  |         |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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

OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

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

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

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

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

| I. Receipts                                                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                             |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                                | 0.00                          | 163348.19                         |
| (i) Itemized (use Schedule A) .....                                                                    | 0.00                          | 1252.00                           |
| (ii) Unitemized .....                                                                                  | 0.00                          | 164600.19                         |
| (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) .....     | 0.00                          | 164600.19                         |
| 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                          | 5000.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....                                           | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds                                                         |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....                                                       | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....                                                               | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).                                                              | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 0.00                          | 169600.19                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 0.00                          | 169600.19                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>                                                                              | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|-------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------|
| 21. Operating Expenditures:                                                                           |                                       |                                           |
| (a) Shared Federal/Non-Federal<br>Activity (from Schedule H4)                                         |                                       |                                           |
| (i) Federal Share.....                                                                                | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....                                                                           | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating<br>Expenditures.....                                                      | 0.00                                  | 0.00                                      |
| (c) Total Operating Expenditures<br>(add 21(a)(i), (a)(ii) and (b))..... ▶                            | 0.00                                  | 0.00                                      |
| 22. Transfers to Affiliated/Other Party<br>Committees.....                                            | 0.00                                  | 0.00                                      |
| 23. Contributions to<br>Federal Candidates/Committees.....<br>and Other Political Committees.....     | 53636.00                              | 137636.00                                 |
| 24. Independent Expenditure<br>(use Schedule E) .....                                                 | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party<br>Committees (2 U.S.C. 441a(d))<br>(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<br>Than Political Committees .....                                      | 0.00                                  | 0.00                                      |
| (b) Political Party Committees                                                                        | 0.00                                  | 0.00                                      |
| (c) Other Political Committees<br>(such as PACs) .....                                                | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds<br>(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<br>(from Schedule H6)                                            |                                       |                                           |
| (i) Federal Share .....                                                                               | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....                                                                              | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely<br>With Federal Funds .....                               | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add<br>Lines 30(a)(i), 30(a)(ii) and 30(b))....                  | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22,<br>23, 24, 25, 26, 27, 28(d), 29 and 30(c))..           | 53636.00                              | 137636.00                                 |
| 32. Total Federal Disbursements<br>(subtract Line 21(a)(ii) from Line 30(a)(ii)<br>from Line 31)..... | 53636.00                              | 137636.00                                 |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 0.00                          | 164600.19                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 0.00                          | 164600.19                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

**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)

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

|                                                                                                                                   |                                                                                                                                                      |                                        |                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. CHRISTOPHER B CANNON</b>                                                         |                                                                                                                                                      | <b>Transaction ID: SB23.5752</b>       |                                                    |
| Mailing Address 190 W 800 N STE 100                                                                                               |                                                                                                                                                      | Date of Disbursement<br>06 / 22 / 2006 |                                                    |
| City<br>PROVO                                                                                                                     | State<br>UT                                                                                                                                          | Zip Code<br>84601                      | Amount of Each Disbursement this Period<br>1000.00 |
| Purpose of Disbursement<br>Contribution                                                                                           |                                                                                                                                                      | Category/<br>Type                      |                                                    |
| Candidate Name                                                                                                                    |                                                                                                                                                      |                                        |                                                    |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                        |                                                    |
| State: UT                                                                                                                         | District: 03                                                                                                                                         |                                        |                                                    |

|                                                                                                                                   |                                                                                                                                                      |                                        |                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. STEVEN JOSEPH CHABOT</b>                                                         |                                                                                                                                                      | <b>Transaction ID: SB23.5750</b>       |                                                    |
| Mailing Address 3025 DAYTONA AVE                                                                                                  |                                                                                                                                                      | Date of Disbursement<br>06 / 26 / 2006 |                                                    |
| City<br>CINCINNATI                                                                                                                | State<br>OH                                                                                                                                          | Zip Code<br>45211                      | Amount of Each Disbursement this Period<br>1000.00 |
| Purpose of Disbursement<br>Contribution                                                                                           |                                                                                                                                                      | Category/<br>Type                      |                                                    |
| Candidate Name                                                                                                                    |                                                                                                                                                      |                                        |                                                    |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                        |                                                    |
| State: OH                                                                                                                         | District: 01                                                                                                                                         |                                        |                                                    |

|                                                                                                                        |                                                                                                                                      |                                        |                                                    |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. DNC</b>                                                               |                                                                                                                                      | <b>Transaction ID: SB23.5744</b>       |                                                    |
| Mailing Address 430 S. CAPITOL STREET S.E.                                                                             |                                                                                                                                      | Date of Disbursement<br>06 / 27 / 2006 |                                                    |
| City<br>WASHINGTON                                                                                                     | State<br>DC                                                                                                                          | Zip Code<br>20003                      | Amount of Each Disbursement this Period<br>1000.00 |
| Purpose of Disbursement                                                                                                |                                                                                                                                      | Category/<br>Type                      |                                                    |
| Candidate Name                                                                                                         |                                                                                                                                      |                                        |                                                    |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                        |                                                    |
| State:                                                                                                                 | District:                                                                                                                            |                                        |                                                    |

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

**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)  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

|                                                                                                                                      |                                                                                                                                                      |                                        |                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. CHRISTOPHER J DODD</b>                                                              |                                                                                                                                                      | <b>Transaction ID: SB23.5757</b>       |                                                    |
| Mailing Address PO BOX 331133                                                                                                        |                                                                                                                                                      | Date of Disbursement<br>06 / 21 / 2006 |                                                    |
| City<br>WEST HARTFORD                                                                                                                | State<br>CT                                                                                                                                          | Zip Code<br>06133                      | Amount of Each Disbursement this Period<br>5000.00 |
| Purpose of Disbursement<br>Contribution                                                                                              |                                                                                                                                                      | Category/<br>Type                      |                                                    |
| Candidate Name                                                                                                                       |                                                                                                                                                      |                                        |                                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                        |                                                    |
| State: CT                                                                                                                            | District: 00                                                                                                                                         |                                        |                                                    |

|                                                                                                                                      |                                                                                                                                                      |                                        |                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. RICHARD J DURBIN</b>                                                                |                                                                                                                                                      | <b>Transaction ID: SB23.5760</b>       |                                                    |
| Mailing Address 1525 S BATES                                                                                                         |                                                                                                                                                      | Date of Disbursement<br>06 / 21 / 2006 |                                                    |
| City<br>SPRINGFIELD                                                                                                                  | State<br>IL                                                                                                                                          | Zip Code<br>62704                      | Amount of Each Disbursement this Period<br>3000.00 |
| Purpose of Disbursement<br>Contribution                                                                                              |                                                                                                                                                      | Category/<br>Type                      |                                                    |
| Candidate Name                                                                                                                       |                                                                                                                                                      |                                        |                                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                        |                                                    |
| State: IL                                                                                                                            | District: 00                                                                                                                                         |                                        |                                                    |

|                                                                                                                                      |                                                                                                                                      |                                        |                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. FRIENDS OF JOE LIEBERMAN</b>                                                        |                                                                                                                                      | <b>Transaction ID: SB23.5740</b>       |                                                     |
| Mailing Address PO BOX 231294, STATE HOUSE SQUARE<br>STATE HOUSE SQUARE                                                              |                                                                                                                                      | Date of Disbursement<br>06 / 27 / 2006 |                                                     |
| City<br>HARTFORD                                                                                                                     | State<br>CT                                                                                                                          | Zip Code<br>06123                      | Amount of Each Disbursement this Period<br>-4000.00 |
| Purpose of Disbursement<br>Voided check #1448 5/30/06                                                                                |                                                                                                                                      | Category/<br>Type                      |                                                     |
| Candidate Name                                                                                                                       |                                                                                                                                      |                                        |                                                     |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                        |                                                     |
| State: CT                                                                                                                            | District: 00                                                                                                                         |                                        |                                                     |

|                                                                  |                |
|------------------------------------------------------------------|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>4000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

|                                                                                                                                   |                                                                                                                                                      |                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. FRIENDS OF JOE LIEBERMAN</b>                                                     |                                                                                                                                                      | <b>Transaction ID: SB23.5745</b><br>Date of Disbursement                                              |
| Mailing Address PO BOX 231294, STATE HOUSE SQUARE<br>STATE HOUSE SQUARE                                                           |                                                                                                                                                      | <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2006"/> |
| City HARTFORD                                                                                                                     | State CT                                                                                                                                             | Zip Code 06123                                                                                        |
| Purpose of Disbursement<br>Contribution                                                                                           |                                                                                                                                                      | Amount of Each Disbursement this Period<br><input type="text" value="3000.00"/>                       |
| Candidate Name                                                                                                                    |                                                                                                                                                      |                                                                                                       |
| Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                                                                       |
| State: CT                                                                                                                         | District: 00                                                                                                                                         |                                                                                                       |

|                                                                                                                                   |                                                                                                                                                      |                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. STENY HAMILTON HOYER</b>                                                         |                                                                                                                                                      | <b>Transaction ID: SB23.5753</b><br>Date of Disbursement                                              |
| Mailing Address 40740 PARLETT MORGAN ROAD                                                                                         |                                                                                                                                                      | <input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2006"/> |
| City CHARLOTTE HALL                                                                                                               | State MD                                                                                                                                             | Zip Code 20622                                                                                        |
| Purpose of Disbursement<br>Contribution                                                                                           |                                                                                                                                                      | Amount of Each Disbursement this Period<br><input type="text" value="1000.00"/>                       |
| Candidate Name                                                                                                                    |                                                                                                                                                      |                                                                                                       |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                                                                       |
| State: MD                                                                                                                         | District: 05                                                                                                                                         |                                                                                                       |

|                                                                                                                                   |                                                                                                                                                      |                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. La Prima</b>                                                                     |                                                                                                                                                      | <b>Transaction ID: SB23.5763</b><br>Date of Disbursement                                              |
| Mailing Address 5105 Berwyn Road                                                                                                  |                                                                                                                                                      | <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2006"/> |
| City College Park                                                                                                                 | State MD                                                                                                                                             | Zip Code 20740                                                                                        |
| Purpose of Disbursement<br>In Kind Contribution                                                                                   |                                                                                                                                                      | Amount of Each Disbursement this Period<br><input type="text" value="136.00"/>                        |
| Candidate Name<br>ITALO ANDRES ZANZI                                                                                              |                                                                                                                                                      |                                                                                                       |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2006<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                                                                       |
| State: NY                                                                                                                         | District: 01                                                                                                                                         |                                                                                                       |

|                                                                  |                                      |
|------------------------------------------------------------------|--------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="4136.00"/> |
| <b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

|                                                                                                                                                       |                                                                                                                                                      |                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. FRANK R LAUTENBERG</b>                                                                               |                                                                                                                                                      | Transaction ID: SB23.5748<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 2 7 / 2 0 0 6 |
| Mailing Address GATEWAY ONE SUITE 2310                                                                                                                |                                                                                                                                                      | Amount of Each Disbursement this Period<br>1500.00                                              |
| City NEWARK State NJ Zip Code 07102                                                                                                                   | Purpose of Disbursement Contribution<br>Candidate Name                                                                                               |                                                                                                 |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NJ District: 00 | Disbursement For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type                                                                               |

|                                                                                                                                                      |                                                                                                                                                      |                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. EDWARD JOHN MARKEY</b>                                                                              |                                                                                                                                                      | Transaction ID: SB23.5754<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 2 1 / 2 0 0 6 |
| Mailing Address 7 Townsend Street                                                                                                                    |                                                                                                                                                      | Amount of Each Disbursement this Period<br>2000.00                                              |
| City Malden State MA Zip Code 02148                                                                                                                  | Purpose of Disbursement Contribution<br>Candidate Name                                                                                               |                                                                                                 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MA District: 7 | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type                                                                               |

|                                                                                                                                                       |                                                                                                                                                      |                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. JOHN S MCCAIN</b>                                                                                    |                                                                                                                                                      | Transaction ID: SB23.5742<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 2 8 / 2 0 0 6 |
| Mailing Address PO BOX 32128                                                                                                                          |                                                                                                                                                      | Amount of Each Disbursement this Period<br>2000.00                                              |
| City PHOENIX State AZ Zip Code 85064                                                                                                                  | Purpose of Disbursement Contribution<br>Candidate Name                                                                                               |                                                                                                 |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 00 | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/<br>Type                                                                               |

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 5500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

|                                                                                                                           |                                                                                                                                      |                                                          |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>                          |                                                                                                                                      | <b>Transaction ID:</b> SB23.5741                         |
| Mailing Address 320 FIRST STREET                                                                                          |                                                                                                                                      | Date of Disbursement<br>MM / DD / YYYY<br>06 / 30 / 2006 |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                          | Zip Code<br>20003                                        |
| Purpose of Disbursement<br>Contribution                                                                                   |                                                                                                                                      | Amount of Each Disbursement this Period<br>15000.00      |
| Candidate Name                                                                                                            |                                                                                                                                      |                                                          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                          |
| State:<br>District:                                                                                                       |                                                                                                                                      |                                                          |

|                                                                                                                           |                                                                                                                                      |                                                          |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. NRSC</b>                                                                 |                                                                                                                                      | <b>Transaction ID:</b> SB23.5751                         |
| Mailing Address 425 SECOND STREET NE                                                                                      |                                                                                                                                      | Date of Disbursement<br>MM / DD / YYYY<br>06 / 22 / 2006 |
| City<br>WASHINGTON                                                                                                        | State<br>DC                                                                                                                          | Zip Code<br>20002                                        |
| Purpose of Disbursement<br>Contribution                                                                                   |                                                                                                                                      | Amount of Each Disbursement this Period<br>15000.00      |
| Candidate Name                                                                                                            |                                                                                                                                      |                                                          |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                          |
| State:<br>District:                                                                                                       |                                                                                                                                      |                                                          |

|                                                                                                                                      |                                                                                                                                                         |                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. ROBERT C BOBBY SCOTT</b>                                                            |                                                                                                                                                         | <b>Transaction ID:</b> SB23.5758                         |
| Mailing Address PO BOX 251                                                                                                           |                                                                                                                                                         | Date of Disbursement<br>MM / DD / YYYY<br>06 / 21 / 2006 |
| City<br>NEWPORT NEWS                                                                                                                 | State<br>VA                                                                                                                                             | Zip Code                                                 |
| Purpose of Disbursement<br>Contribution                                                                                              |                                                                                                                                                         | Amount of Each Disbursement this Period<br>1000.00       |
| Candidate Name                                                                                                                       |                                                                                                                                                         |                                                          |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br>2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                                                          |
| State: VA<br>District: 03                                                                                                            |                                                                                                                                                         |                                                          |

|                                                                  |                 |
|------------------------------------------------------------------|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>31000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                 |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE

|                                                                                                                                   |                           |                                                                                                                                                      |                   |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. TOMPAC</b>                                                                       |                           | <b>Transaction ID: SB23.5759</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 2 1 / 2 0 0 6                                               |                   |
| Mailing Address PO Box 16488                                                                                                      |                           | Amount of Each Disbursement this Period<br>5000.00                                                                                                   |                   |
| City<br>Arlington                                                                                                                 | State<br>VA               | Zip Code<br>22215                                                                                                                                    | Category/<br>Type |
| Purpose of Disbursement<br>Contribution                                                                                           |                           | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name<br>THOMAS M REYNOLDS                                                                                               |                           |                                                                                                                                                      |                   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: NY<br>District: 26 |                                                                                                                                                      |                   |

|                                                                                                                                   |                           |                                                                                                                                                      |                   |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. FREDERICK STEPHEN UPTON</b>                                                      |                           | <b>Transaction ID: SB23.5743</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 2 8 / 2 0 0 6                                               |                   |
| Mailing Address 285 RIDGEWAY<br>P O BOX 900                                                                                       |                           | Amount of Each Disbursement this Period<br>1000.00                                                                                                   |                   |
| City<br>ST JOSEPH                                                                                                                 | State<br>MI               | Zip Code<br>49085                                                                                                                                    | Category/<br>Type |
| Purpose of Disbursement<br>Contribution                                                                                           |                           | Disbursement For: 2006<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |
| Candidate Name                                                                                                                    |                           |                                                                                                                                                      |                   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: MI<br>District: 06 |                                                                                                                                                      |                   |

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

6000.00

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

53636.00