

**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

Narragansett Bay PAC

ADDRESS (number and street) P.O. Box 8628

Check if different than previously reported. (ACC) Cranston RI 02920

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00403592

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)

(c) 12-Day **PRE**-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  Convention (12C)  Special (12G)

(d) 30-Day **Post**-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)

5. Covering Period 01 01 2007 through 06 30 2007

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 Elizabeth Young

Signature of Treasurer Electronically Filed by Elizabeth Young Date 07 27 2007

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Narragansett Bay PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">78444.29</td></tr></table>	78444.29
Y	Y	Y	Y									
2	0	0	7									
78444.29												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">78444.29</td></tr></table>	78444.29										
78444.29												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">62500.00</td></tr></table>	62500.00	<table border="1" style="width: 100%;"><tr><td align="right">62500.00</td></tr></table>	62500.00								
62500.00												
62500.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">140944.29</td></tr></table>	140944.29	<table border="1" style="width: 100%;"><tr><td align="right">140944.29</td></tr></table>	140944.29								
140944.29												
140944.29												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">77346.35</td></tr></table>	77346.35	<table border="1" style="width: 100%;"><tr><td align="right">77346.35</td></tr></table>	77346.35								
77346.35												
77346.35												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">63597.94</td></tr></table>	63597.94	<table border="1" style="width: 100%;"><tr><td align="right">63597.94</td></tr></table>	63597.94								
63597.94												
63597.94												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Narragansett Bay PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	22500.00	22500.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	22500.00	22500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	40000.00	40000.00
(c) Other Political Committees (such as PACs) .....	62500.00	62500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	62500.00	62500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	62500.00	62500.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17346.35	17346.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	17346.35	17346.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45000.00	45000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	15000.00	15000.00
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))..	77346.35	77346.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	77346.35	77346.35

**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) .....	62500.00	62500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	62500.00	62500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17346.35	17346.35
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17346.35	17346.35

**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 / 25
	<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Anne T. Bass</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 201 Main St. Suite 3100		<b>Transaction ID: C4181088</b>
City Fort Worth	State TX	Zip Code 76102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Keystone, Inc.	Occupation investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. James R. Carnes</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address W 64th St.		<b>Transaction ID: C4200141</b>
City Kansas City	State MO	Zip Code 64113
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Zip Cash	Occupation president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph V. Chastain</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 1947 Bay Hill Dr		<b>Transaction ID: C4200142</b>
City Hixson	State TN	Zip Code 37343-1527
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer DFM Group	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark E. Curry		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007
Mailing Address 2803 W 140th St		<b>Transaction ID:</b> C4302150
City State Zip Code Leawood KS 66224-3939	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Geneva Roth executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> William J. Dugan		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007
Mailing Address 7226 Booth St		<b>Transaction ID:</b> C4302153
City State Zip Code Prairie Village KS 66208-3351	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Smith, Haynes & Watson executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Edward N. Foster		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2007
Mailing Address 1204 W 66th Ter		<b>Transaction ID:</b> C4200143
City State Zip Code Kansas City MO 64113-1844	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Zip Cash executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark T. Gallogly		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address 333 Central Park W Apt 76		<b>Transaction ID:</b> C4181084	
City State Zip Code New York NY 10025-7105	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Centerbridge Partners, L.P.	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Del Kimball		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 110 W 9th St Ste 100		<b>Transaction ID:</b> C4200144	
City State Zip Code Kansas City MO 64105-1791	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Evergreen Capital Partners	Occupation principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> John W. Kimball		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 7	
Mailing Address 321 W 7th St # NO.409		<b>Transaction ID:</b> C4302152	
City State Zip Code Kansas City MO 64105-1686	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Evergreen Capital Partners	Occupation partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Cory Lagerstrom</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 6630 Rainbow Avenue		<b>Transaction ID: C4200145</b>
City State Zip Code Mission Hills KS 66208	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Aspen Wealth Management principal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Christopher Long</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 8529 W Oak Pl		<b>Transaction ID: C4302151</b>
City State Zip Code Vienna VA 22182-5066	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Washington Resource Associates President and C.E.O.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. C. Andrew Martin</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 9519 Manor Rd		<b>Transaction ID: C4302154</b>
City State Zip Code Leawood KS 66206-2250	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Evergreen Capital Partners partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 25
	<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Vincent K. Ney		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 6523 Amber Oak		<b>Transaction ID:</b> C4200146
City San Antonio	State TX	Zip Code 78249
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer GECC	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Grady Reynolds		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 5640 Dunlap Court		<b>Transaction ID:</b> C4200147
City Plano	State TX	Zip Code 75093
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer DP Bureau	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Joel J. Tucker		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 2501 Arno		<b>Transaction ID:</b> C4200148
City Shawnee Mission	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer BMG Consulting	Occupation president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 25	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Narragansett Bay PAC

**A.** Full Name (Last, First, Middle Initial)  
Ben Underwood

Mailing Address 823 Northbrook Dr

City	State	Zip Code
Hixson	TN	37343-1261

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

Name of Employer DFM Group	Occupation compliance manager
-------------------------------	----------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	7

Transaction ID: C4200149

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	22500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 25
	<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Anheuser- Busch Companies Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 06 / 12 / 2007
Mailing Address ONE BUSCH PLACE 202-5		<b>Transaction ID:</b> C4302148
City ST. LOUIS	State MO	Zip Code 63118
FEC ID number of contributing federal political committee. <b>C</b> C00034488		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Bank of America PAC		Date of Receipt M M / D D / Y Y Y Y Y 02 / 01 / 2007
Mailing Address Bank of America Corporation 730 15th Street, NW		<b>Transaction ID:</b> C4181085
City Washington	State DC	Zip Code 20005-2102
FEC ID number of contributing federal political committee. <b>C</b> C00364778		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Caremark RX Inc. Employees PAC		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2007
Mailing Address 2211 Sanders Road 10th Floor		<b>Transaction ID:</b> C4302155
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. <b>C</b> C00384818		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 25
	(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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Credit Suisse Securities USA PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 1155 21st Street NW Suite 300		<b>Transaction ID: C4200139</b>	
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00111559			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Investment Company Institute PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7	
Mailing Address 1401 H Street, NW 4th floor		<b>Transaction ID: C4302149</b>	
City Washington State DC Zip Code 20005-2148	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00105981			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. J.P. Morgan Chase &amp; Co. State and Federal PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 270 Park Avenue, 21st Floor		<b>Transaction ID: C4181086</b>	
City New York State NY Zip Code 10017	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00003830			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 25
	(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)  
Narragansett Bay PAC

**A.** Full Name (Last, First, Middle Initial)  
Online Lenders Alliance PAC

Mailing Address 725 S Emerson St

City State Zip Code  
Denver CO 80209-4340

FEC ID number of contributing federal political committee. **C** C00427781

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  
05 / 18 / 2007

Transaction ID: C4200150

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
SECURITIES INDUSTRY ASSOCIATION PAC

Mailing Address 1425 K St NW  
FI 7

City State Zip Code  
Washington DC 20005-3409

FEC ID number of contributing federal political committee. **C** C00067504

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  
03 / 30 / 2007

Transaction ID: C4181087

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	40000.00

**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 15 / 25

<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Elizabeth R. Young</b>		Transaction ID: D200553 Date of Disbursement 01 / 24 / 2007	
Mailing Address PO Box 3582		Amount of Each Disbursement this Period 1000.00	
City Cranston State RI Zip Code 02910	Purpose of Disbursement Treasurer Administration Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth R. Young</b>		Transaction ID: D200555 Date of Disbursement 02 / 21 / 2007	
Mailing Address PO Box 3582		Amount of Each Disbursement this Period 1000.00	
City Cranston State RI Zip Code 02910	Purpose of Disbursement Treasurer Administration Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth R. Young</b>		Transaction ID: D200559 Date of Disbursement 03 / 20 / 2007	
Mailing Address PO Box 3582		Amount of Each Disbursement this Period 1000.00	
City Cranston State RI Zip Code 02910	Purpose of Disbursement Treasurer Administration Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: (check only one)

<input 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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Elizabeth R. Young</b>		Transaction ID: D200569 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	
Mailing Address PO Box 3582		Amount of Each Disbursement this Period 1000.00	
City Cranston State RI Zip Code 02910	Purpose of Disbursement Treasurer Administration Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth R. Young</b>		Transaction ID: D200574 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address PO Box 3582		Amount of Each Disbursement this Period 1000.00	
City Cranston State RI Zip Code 02910	Purpose of Disbursement Treasurer Administration Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth R. Young</b>		Transaction ID: D200577 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7	
Mailing Address PO Box 3582		Amount of Each Disbursement this Period 1000.00	
City Cranston State RI Zip Code 02910	Purpose of Disbursement Treasurer Administration Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. JYP Consulting</b>		<b>Transaction ID: D200575</b>	
Mailing Address 236 Massachusetts Av. NE		Date of Disbursement 05 / 29 / 2007	
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Consultant Fee (Fundraising)		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. JYP Consulting</b>		<b>Transaction ID: D200570</b>	
Mailing Address 236 Massachusetts Av. NE		Date of Disbursement 04 / 25 / 2007	
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Consultant Fee (Fundraising)		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. JYP Consulting</b>		<b>Transaction ID: D200560</b>	
Mailing Address 236 Massachusetts Av. NE		Date of Disbursement 03 / 27 / 2007	
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Consultant Fee (Fundraising)		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4500.00</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 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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. JYP Consulting</b>		<b>Transaction ID: D200556</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 236 Massachusetts Av. NE		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20002	003 Category/ Type	
Purpose of Disbursement Consultant Fee (Fundraising)		
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>B. NGP Software, Inc.</b>		<b>Transaction ID: D200583</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 1101 Vermont Ave., NW Suite 710		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20005	001 Category/ Type	
Purpose of Disbursement software support		
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>C. NGP Software, Inc.</b>		<b>Transaction ID: D200584</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 1101 Vermont Ave., NW Suite 710		Amount of Each Disbursement this Period 150.00
City Washington State DC Zip Code 20005	001 Category/ Type	
Purpose of Disbursement software support		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1800.00
<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 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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Venable LLP</b>		Transaction ID: D200571	
Mailing Address 575 7th St. NW		Date of Disbursement 05 / 14 / 2007	
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 150.00
Purpose of Disbursement Event Expenses (Fundraising)		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Venable LLP</b>		Transaction ID: D200572	
Mailing Address 575 7th St. NW		Date of Disbursement 05 / 14 / 2007	
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 1078.90
Purpose of Disbursement Event Expenses (Fundraising)		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Viking Hotel</b>		Transaction ID: D200554	
Mailing Address 1 Bellevue Ave.		Date of Disbursement 02 / 06 / 2007	
City Newport	State RI	Zip Code 02840	Amount of Each Disbursement this Period 3800.00
Purpose of Disbursement Fundraising Expense		003 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5028.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>17328.90</b>

**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 / 25

<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Citizens for Tom Harkin</b>		Transaction ID: D200567 Date of Disbursement 03 / 28 / 2007
Mailing Address PO Box 811		Amount of Each Disbursement this Period 2500.00
City Des Moines	State IA Zip Code 50304	
Purpose of Disbursement Contributions to Candidates-Fed Candidate Name Tom Harkin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:		

Full Name (Last, First, Middle Initial) <b>B. Citizens for Tom Harkin</b>		Transaction ID: D200579 Date of Disbursement 06 / 29 / 2007
Mailing Address PO Box 811		Amount of Each Disbursement this Period 2500.00
City Des Moines	State IA Zip Code 50304	
Purpose of Disbursement Contributions to Candidates-Fed Candidate Name Tom Harkin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Dick Durbin Committee</b>		Transaction ID: D200580 Date of Disbursement 06 / 29 / 2007
Mailing Address PO BOX 1949		Amount of Each Disbursement this Period 2500.00
City SPRINGFIELD	State IL Zip Code 62705	
Purpose of Disbursement Contributions to Candidates-Fed Candidate Name Dick Durbin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Friends of Dick Durbin Committee</b>		<b>Transaction ID:</b> D200561 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7
Mailing Address PO BOX 1949		Amount of Each Disbursement this Period 2500.00
City SPRINGFIELD State IL Zip Code 62705	011 Category/ Type	
Purpose of Disbursement Contributions to Candidates-Fed		
Candidate Name Dick Durbin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Mary L. Landrieu Inc.</b>		<b>Transaction ID:</b> D200562 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7
Mailing Address 607 14th St., NW		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20005	011 Category/ Type	
Purpose of Disbursement Contributions to Candidates-Fed		
Candidate Name Mary L. Landrieu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Mary L. Landrieu Inc.</b>		<b>Transaction ID:</b> D200582 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 607 14th St., NW		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20005	011 Category/ Type	
Purpose of Disbursement Contributions to Candidates-Fed		
Candidate Name Mary L. Landrieu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> 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 22 / 25

<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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MAX BAUCUS</b>		Transaction ID: D200581 Date of Disbursement 06 / 29 / 2007
Mailing Address PO BOX 586		Amount of Each Disbursement this Period 5000.00
City HELENA	State MT	
Zip Code 59624		
Purpose of Disbursement Contributions to Candidates-Fed Category/Type: 011		
Candidate Name Max Baucus		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Carl Levin</b>		Transaction ID: D200564 Date of Disbursement 03 / 28 / 2007
Mailing Address 10 G St NE		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20002-4213		
Purpose of Disbursement Contributions to Candidates-Fed Category/Type: 011		
Candidate Name Carl Levin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District:		

Full Name (Last, First, Middle Initial) <b>C. Lautenberg for Senate</b>		Transaction ID: D200563 Date of Disbursement 03 / 28 / 2007
Mailing Address GATEWAY ONE 23RD FLOOR		Amount of Each Disbursement this Period 5000.00
City Newark	State NJ	
Zip Code 07102		
Purpose of Disbursement Contributions to Candidates-Fed Category/Type: 011		
Candidate Name Frank R. Lautenberg		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> 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)

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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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Lautenberg for Senate</b>		Transaction ID: D200578 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address GATEWAY ONE 23RD FLOOR		Amount of Each Disbursement this Period 5000.00	
City Newark State NJ Zip Code 07102	Purpose of Disbursement Contributions to Candidates-Fed 011 Category/ Type		
Candidate Name Frank R. Lautenberg			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District:			

Full Name (Last, First, Middle Initial) <b>B. Mark Pryor for US Senate</b>		Transaction ID: D200565 Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2007	
Mailing Address PO Box 2720		Amount of Each Disbursement this Period 2500.00	
City Little Rock State AR Zip Code 72203-2720	Purpose of Disbursement Contributions to Candidates-Fed 011 Category/ Type		
Candidate Name Mark Pryor			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AR District:			

Full Name (Last, First, Middle Initial) <b>C. Mark Pryor for US Senate</b>		Transaction ID: D200566 Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2007	
Mailing Address PO Box 2720		Amount of Each Disbursement this Period 2500.00	
City Little Rock State AR Zip Code 72203-2720	Purpose of Disbursement Contributions to Candidates-Fed 011 Category/ Type		
Candidate Name Mark Pryor			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AR District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> 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)

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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)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial) <b>A. Tim Johnson for So. Dakota Inc.</b>		Transaction ID: D200568 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7	
Mailing Address PO BOX 1859		Amount of Each Disbursement this Period 5000.00	
City SIOUX FALLS	State SD	Zip Code 57101	011 Category/ Type
Purpose of Disbursement Contributions to Candidates-Fed			
Candidate Name Tim Johnson		Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	45000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Narragansett Bay PAC

Full Name (Last, First, Middle Initial)  
**A. Democratic Senatorial Campaign Committee**

**Transaction ID: D200558**

Date of Disbursement

Mailing Address 120 Maryland Av. NE

<sup>M</sup> 0	<sup>M</sup> 3	/	<sup>D</sup> 1	<sup>D</sup> 3	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
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City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

15000.00
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Purpose of Disbursement  
Contributions-other

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: District:

contribution

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