

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

The WISH List

ADDRESS (number and street) 333 N. Fairfax St.
Suite 302
Check if different than previously reported. (ACC) Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00258277

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:
- | | | | |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 03 01 2007 through 03 31 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 Candace L. Straight

Signature of Treasurer Electronically Filed by Candace L. Straight Date 04 17 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
The WISH List

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

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">19070.93</td></tr></table>	19070.93
Y	Y	Y	Y									
2	0	0	7									
19070.93												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">22553.79</td></tr></table>	22553.79										
22553.79												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">11149.15</td></tr></table>	11149.15	<table border="1" style="width: 100%;"><tr><td align="right">67447.12</td></tr></table>	67447.12								
11149.15												
67447.12												
(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">33702.94</td></tr></table>	33702.94	<table border="1" style="width: 100%;"><tr><td align="right">86518.05</td></tr></table>	86518.05								
33702.94												
86518.05												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">16058.89</td></tr></table>	16058.89	<table border="1" style="width: 100%;"><tr><td align="right">68874.00</td></tr></table>	68874.00								
16058.89												
68874.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">17644.05</td></tr></table>	17644.05	<table border="1" style="width: 100%;"><tr><td align="right">17644.05</td></tr></table>	17644.05								
17644.05												
17644.05												
9. Debts and Obligations owed TO 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 BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">11591.25</td></tr></table>	11591.25										
11591.25												

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
The WISH List

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

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	4693.33	38201.66
(i) Itemized (use Schedule A)	2755.00	11043.00
(ii) Unitemized	7448.33	49244.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	2500.00	7500.00
(c) Other Political Committees (such as PACs)	9948.33	56744.66
(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.)	0.82	2.46
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	1200.00	10700.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	1200.00	10700.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11149.15	67447.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9949.15	56747.12

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	8958.65	36592.53
(ii) Non-Federal Share.....	6847.88	30295.68
(b) Other Federal Operating Expenditures.....	252.36	1985.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16058.89	68874.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16058.89	68874.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	9211.01	38578.32

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)	9948.33	56744.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9948.33	56744.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9211.01	38578.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9211.01	38578.32

**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 / 30
	<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)
The WISH List

Full Name (Last, First, Middle Initial) A. Ms. Anita Volz Wien		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address 555 Park Avenue Apartment 8E		Transaction ID: 13862624
City State Zip Code New York NY 10021-8166	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer G7 Group	Occupation Political Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ms. Kimberly L. Quinones		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 638 Palisades Drive		Transaction ID: 13862702
City State Zip Code Pacific Palisades CA 90272-2849	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Ramirez & Co., Inc.	Occupation Banker - Public Finance	
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) C. Ms. Diane Fitzgerald-Verbonitz		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2007
Mailing Address Box 3404 1301 Coyote Pass		Transaction ID: 13862731
City State Zip Code Carefree AZ 85377	Amount of Each Receipt this Period 208.33	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Arizona Psychological Association	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66	

SUBTOTAL of Receipts This Page (optional) ▶	1208.33
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 30
	<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)
The WISH List

A. Full Name (Last, First, Middle Initial)
Mrs. Sharon A. Keith

Mailing Address 657 Hightree Road

City State Zip Code
Santa Monica CA 90402

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2007

Transaction ID: 13862735

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Honor Heyward Bulkley

Mailing Address PO Box 597006

City State Zip Code
San Francisco CA 94159-7006

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

Name of Employer Occupation
Round Hill Pacific Property Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 13862739

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Patricia D. Smithson

Mailing Address 318 West Blackbeard Road

City State Zip Code
Wilmington NC 28409-2706

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

Name of Employer Occupation
PDS, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2007

Transaction ID: 13862761

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 30
	<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)
The WISH List

A. Full Name (Last, First, Middle Initial)
Miss Virginia S. Donnell

Mailing Address The Sequoias
1400 Geary Boulevard, Apartment 30

City San Francisco State CA Zip Code 94109

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2007

Transaction ID: 13862765

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. James Rowland Lowe, Jr.

Mailing Address 4615 Cathedral Avenue, N.W.

City Washington State DC Zip Code 20016-3426

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2007

Transaction ID: 13862766

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Miss Virginia S. Donnell

Mailing Address The Sequoias
1400 Geary Boulevard, Apartment 30

City San Francisco State CA Zip Code 94109

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

Name of Employer Occupation Retired

Receipt For: 2008 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2007

Transaction ID: 13885502

Amount of Each Receipt this Period
25.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 30
	<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)
The WISH List

A. Full Name (Last, First, Middle Initial)
Miss Virginia S. Donnell

Mailing Address The Sequoias
1400 Geary Boulevard, Apartment 30

City San Francisco State CA Zip Code 94109

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

Name of Employer Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2007

Transaction ID: 13885505

Amount of Each Receipt this Period
50.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mrs. Anne Powell

Mailing Address 2363 Tremont Road

City Columbus State OH Zip Code 43221-3725

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 13982878

Amount of Each Receipt this Period
210.00

C. Full Name (Last, First, Middle Initial)
The Hon. Shirley N. Pettis

Mailing Address 151 Waterford Circle

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer Occupation Retired Congresswoman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2007

Transaction ID: 13982895

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional)	485.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 30
	(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"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial)
Mrs. Sandy Brock

Mailing Address 16 Revell Street

City State Zip Code
Annapolis MD 21401

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

Name of Employer SMD Occupation Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2007

Transaction ID: 13982900

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Karen Judd Lewis

Mailing Address 5851 Upton Street

City State Zip Code
McLean VA 22101

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

Name of Employer Southwest Airlines Occupation Senior Director, Government Affairs

Receipt For: 2008 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2007

Transaction ID: 13982903

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	4693.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 30
	(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)
The WISH List

A. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 Seventh Street, NW

City	State	Zip Code
Washington	DC	20004

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 9 / 2 0 0 7

Transaction ID: 13982891

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	2500.00

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 12 / 30

<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)
The WISH List

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: 13862468 Date of Disbursement
Mailing Address 201 Pennsylvania Avenue, SE		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Credit card fees	<input type="text" value="001"/> Category/ Type	Amount of Each Disbursement this Period <input type="text" value="236.36"/>
Candidate Name		Credit card fees
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. Bank of America		Transaction ID: 13985712 Date of Disbursement
Mailing Address 201 Pennsylvania Avenue, SE		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Bank Service Charge	<input type="text" value="001"/> Category/ Type	Amount of Each Disbursement this Period <input type="text" value="8.00"/>
Candidate Name		Bank Service Charge
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:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="244.36"/>
TOTAL This Period (last page this line number only)	<input type="text" value="244.36"/>

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 13 / 30

<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)
The WISH List

Full Name (Last, First, Middle Initial) A. Rudy Giuliani Presidential Exploratory Committee		Transaction ID: 13985716 Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2007
Mailing Address 300 Poplar Avenue #6		Amount of Each Disbursement this Period 68.00
City Mill Valley State CA Zip Code 94941	Purpose of Disbursement E-mail Communications Category/Type 011	
Candidate Name Rudy Giuliani	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] E-mail Communications
State: District:	State: District:	

Full Name (Last, First, Middle Initial) B. Collins for Senator		Transaction ID: 13985715 Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2007
Mailing Address P.O. Box 1096		Amount of Each Disbursement this Period 37.10
City Bangor State ME Zip Code 04402-1096	Purpose of Disbursement E-mail Communications Category/Type 011	
Candidate Name Susan Collins	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] E-mail Communications
State: ME District: 0	State: ME District: 0	

Full Name (Last, First, Middle Initial) C. Collins for Senator		Transaction ID: 13885506 Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2007
Mailing Address P.O. Box 1096		Amount of Each Disbursement this Period 1000.00
City Bangor State ME Zip Code 04402-1096	Purpose of Disbursement E-mail Communications Category/Type 011	
Candidate Name Susan Collins	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: ME District: 0	State: ME District: 0	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 30

<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)
The WISH List

Full Name (Last, First, Middle Initial) A. Mary Bono Committee		Transaction ID: 13885508 Date of Disbursement 03 / 16 / 2007
Mailing Address P.O. Box 3370		Amount of Each Disbursement this Period 50.00
City Palm Springs State CA Zip Code 92263	[MEMO ITEM]	
Purpose of Disbursement Candidate Name Mary Bono Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Collins for Senator		Transaction ID: 13885507 Date of Disbursement 03 / 16 / 2007
Mailing Address P.O. Box 1096		Amount of Each Disbursement this Period 25.00
City Bangor State ME Zip Code 04402-1096	[MEMO ITEM]	
Purpose of Disbursement Candidate Name Susan Collins Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 0 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DEBORAH PRYCE FOR HOUSE		Transaction ID: 13982967 Date of Disbursement 03 / 30 / 2007
Mailing Address EOD Consulting, LLC 172 E. State St., Suite 515		Amount of Each Disbursement this Period 500.00
City Columbus State OH Zip Code 43215	[MEMO ITEM]	
Purpose of Disbursement Candidate Name Deborah Pryce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 / 30	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gilbert & Wolfand, PC	Nature of Debt (Purpose): Accounting Services
Mailing Address 2201 Wisconsin Avenue, NW Suite 320	
City State ZIP Code Washington DC 20007	

Outstanding Balance Beginning This Period	Transaction ID: 14003973	
9720.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1871.25	0.00	11591.25

1) SUBTOTALS This Period This Page (optional).....	11591.25
2) TOTALS This Period (last page this line number only).....	11591.25
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
The WISH List

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %
Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

PAGE 17 / 30

NAME OF COMMITTEE (In Full)

The WISH List

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

FRP 07

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

75.00 %

NONFEDERAL %

25.00 %

Transaction ID:
14003972

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 The WISH List

NAME OF ACCOUNT Non Federal Account (Bank of America)	DATE OF RECEIPT M M / D D / Y Y Y Y 03 / 14 / 2007	TOTAL AMOUNT TRANSFERRED 1000.00
---	--	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1000.00	Transaction ID: 13984550
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 The WISH List

NAME OF ACCOUNT Non Federal Account (Bank of America)	DATE OF RECEIPT M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7	TOTAL AMOUNT TRANSFERRED 200.00
---	---	------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		200.00
i) Total Administrative		Transaction ID: 13982866
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	1200.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	1200.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial) Deborah Karvelas			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4917 North 35th Street			Allocated Activity or Event Year-To-Date 54294.60	
City Arlington	State VA	Zip Code 22207	Date <input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Administrative			Transaction ID: 13820553	
Activity or Event Identifier: Writer/web administrator				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1250.00		1250.00		2500.00

B. Full Name (Last, First, Middle Initial) Ginny Douglas			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1171 Los Molinos Way			Allocated Activity or Event Year-To-Date 12593.61	
City Sacramento	State CA	Zip Code 95864	Date <input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: FRP 07			Transaction ID: 13820555	
Activity or Event Identifier: Fundraising consultant				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3000.00		1000.00		4000.00

C. Full Name (Last, First, Middle Initial) Ginny Douglas			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1171 Los Molinos Way			Allocated Activity or Event Year-To-Date 12593.61	
City Sacramento	State CA	Zip Code 95864	Date <input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: FRP 07			Transaction ID: 13820556	
Activity or Event Identifier: Fundraising Consultant				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.13		55.37		221.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4416.13		2305.37		6721.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial) EDonation.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 118 N. St. Asaph Street			Allocated Activity or Event Year-To-Date 54294.60		
City Alexandria	State VA	Zip Code 22314	Date <input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Administrative			Transaction ID: 13862630		
Activity or Event Identifier: Online services					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.50		12.50		25.00

B. Full Name (Last, First, Middle Initial) USPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 Massachusetts Ave., NE			Allocated Activity or Event Year-To-Date 54294.60		
City Washington	State DC	Zip Code 20002	Date <input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Administrative			Transaction ID: 13862633		
Activity or Event Identifier: Postage					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.00		78.00		156.00

C. Full Name (Last, First, Middle Initial) Jadesoft, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6709 Tomlinson Terrace			Allocated Activity or Event Year-To-Date 54294.60		
City Cabin John	State MD	Zip Code 20818	Date <input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Administrative			Transaction ID: 13862687		
Activity or Event Identifier: Computer services					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.00		65.00		130.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.50		155.50		311.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address
PO Box 360001

City State Zip Code
Fort Lauderdale FL 33336-0001

001

Purpose of Disbursement:
Administrative

Category/
Type

Activity or Event Identifier:
See memo entries

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Date MM / DD / YYYY
03 / 12 / 2007

Transaction ID: 13862635

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.04		150.04		300.08

B. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address
PO Box 529

City State Zip Code
Washington DC 20044

001

Purpose of Disbursement:
Administrative

Category/
Type

Activity or Event Identifier:
Delivery services

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Date MM / DD / YYYY
03 / 12 / 2007

Transaction ID: 13862685

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.70		4.69		9.39

C. Full Name (Last, First, Middle Initial)
PAYCHEX

Mailing Address
8300 Colesville Road Suite 100A

City State Zip Code
Silver Spring MD 20910

001

Purpose of Disbursement:
Administrative

Category/
Type

Activity or Event Identifier:
Payroll services

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Date MM / DD / YYYY
03 / 12 / 2007

Transaction ID: 13820558

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.44		58.43		116.87

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
213.18		213.16		426.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial)
MegaPath Networks, Inc.

Mailing Address
Attn: Billing Dept. PO Box 7711

City State Zip Code
San Francisco CA 94120

001

Purpose of Disbursement:
Administrative

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Activity or Event Identifier:
Online services

[MEMO ITEM] Online services

Date MM / DD / YYYY
03 / 12 / 2007

Transaction ID: 13862683

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.92		59.93		119.85

B. Full Name (Last, First, Middle Initial)
Enterprise Rent-A-Car

Mailing Address
Attn: Accts Receivable 4515 Auburn Blvd.

City State Zip Code
Sacramento CA 95841-4202

001

Purpose of Disbursement:
Administrative

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Activity or Event Identifier:
Travel

[MEMO ITEM] Travel

Date MM / DD / YYYY
03 / 12 / 2007

Transaction ID: 13862678

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.62		34.61		69.23

C. Full Name (Last, First, Middle Initial)
Simpson Properties, Ltd.

Mailing Address
P.O. Box 430

City State Zip Code
Alexandria VA 22313

001

Purpose of Disbursement:
Administrative

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Activity or Event Identifier:
Rent

Date MM / DD / YYYY
03 / 12 / 2007

Transaction ID: 13862688

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1031.37		1031.37		2062.74

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1031.37		1031.37		2062.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial)
Michael's Florist

Mailing Address
280 Berkeley Avenue

City State Zip Code
Bloomfield NJ 07003

001
Category/
Type

Purpose of Disbursement:
Administrative

Activity or Event Identifier:
Sympathy flowers
[MEMO ITEM] Sympathy flowers

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Date 03 / 12 / 2007

Transaction ID: 13862681

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.50		55.50		111.00

B. Full Name (Last, First, Middle Initial)
PAYCHEX

Mailing Address
8300 Colesville Road Suite 100A

City State Zip Code
Silver Spring MD 20910

001
Category/
Type

Purpose of Disbursement:
Administrative

Activity or Event Identifier:
Payroll taxes

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Date 03 / 15 / 2007

Transaction ID: 13885456

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
836.55		836.55		1673.10

C. Full Name (Last, First, Middle Initial)
Patricia Carpenter

Mailing Address
8051 Windward Key Drive

City State Zip Code
Chesapeake Beach MD 20732

001
Category/
Type

Purpose of Disbursement:
Administrative

Activity or Event Identifier:
Payroll

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54294.60

Date 03 / 15 / 2007

Transaction ID: 13885237

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1440.66		1440.66		2881.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2277.21		2277.21		4554.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial) Graybar Financial Services, LLC.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11885 Lackland Road			Allocated Activity or Event Year-To-Date 54294.60		
City St. Louis	State MO	Zip Code 63146	Date MM / DD / YYYY 03 / 16 / 2007		
Purpose of Disbursement: Administrative			Transaction ID: 13885497		
Activity or Event Identifier: Telephone					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.71		91.71		183.42

B. Full Name (Last, First, Middle Initial) Key Printing & Duplicating			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14300 Cherry Lane Ct.			Allocated Activity or Event Year-To-Date 54294.60		
City Laurel	State MD	Zip Code 20707	Date MM / DD / YYYY 03 / 19 / 2007		
Purpose of Disbursement: Administrative			Transaction ID: 13885500		
Activity or Event Identifier: Printing					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.45		118.46		236.91

C. Full Name (Last, First, Middle Initial) Key Printing & Duplicating			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14300 Cherry Lane Ct.			Allocated Activity or Event Year-To-Date 54294.60		
City Laurel	State MD	Zip Code 20707	Date MM / DD / YYYY 03 / 28 / 2007		
Purpose of Disbursement: Administrative			Transaction ID: 13982869		
Activity or Event Identifier: Printing					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.00		84.00		168.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.16		294.17		588.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
The WISH List

A. Full Name (Last, First, Middle Initial) Optimum Choice, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 42924			Allocated Activity or Event Year-To-Date 54294.60	
City Philadelphia	State PA	Zip Code 19101-2924	Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Administrative			Transaction ID: 13982874	
Activity or Event Identifier: Health insurance				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.38		157.38		314.76

B. Full Name (Last, First, Middle Initial) Cavalier			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 2950			Allocated Activity or Event Year-To-Date 54294.60	
City Richmond	State VA	Zip Code 22314-2632	Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Administrative			Transaction ID: 13982871	
Activity or Event Identifier: Telephone service				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.22		98.22		196.44

C. Full Name (Last, First, Middle Initial) Maryland Health Insurance Plan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address MHIP Enrollment Department P.O. Box 47160			Allocated Activity or Event Year-To-Date 54294.60	
City Baltimore	State MD	Zip Code 21244-7160	Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Administrative			Transaction ID: 13982873	
Activity or Event Identifier: Health insurance				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.50		315.50		631.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
571.10		571.10		1142.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
8958.65		6847.88		15806.53

Image# 27930638580

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Transaction ID: **13885507**

Form/Schedule: **SB23** Contribution earmarked by Ms. Karen Judd Lewis and transmitted by contributor's original check.
Transaction ID: **13982967**
