

# 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  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-Q)

ADDRESS (number and street) 1201 15th Street NW  
Suite 400  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00358663  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 04 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Ms. Sandra Yartin DePoy

Signature of Treasurer Electronically Filed by Ms. Sandra Yartin DePoy Date 12 11 2008

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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		1517804.80
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	1718727.70									
(c) Total Receipts (from Line 19) .....	988926.53	1527127.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2707654.23	3044932.56								
7. Total Disbursements (from Line 31) .....	572086.60	909364.93								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2135567.63	2135567.63								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	962883.08	1491602.63
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	962883.08	1491602.63
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	962883.08	1491602.63
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	150.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	26043.45	35375.13
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)) .....	988926.53	1527127.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	988926.53	1527127.76

**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.....	329956.60	553384.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	329956.60	553384.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	157830.00	229330.00
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.....	84300.00	126650.00
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))..	572086.60	909364.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	572086.60	909364.93

**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 .....	962883.08	1491602.63
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	962883.08	1491602.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	329956.60	553384.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	150.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	329956.60	553234.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 39
	<input 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 checked="" 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)  
**AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)**

<b>A.</b>	Full Name (Last, First, Middle Initial) Comerica Securities		Date of Receipt
	Mailing Address 201 W. Fort St.		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Detroit	MI	48226
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 5065 Amount of Each Receipt this Period <input type="text" value="950.65"/> Interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5932.95"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Comerica Securities		Date of Receipt
	Mailing Address 201 W. Fort St.		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Detroit	MI	48226
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 5066 Amount of Each Receipt this Period <input type="text" value="1048.03"/> Interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5932.95"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Comerica Securities		Date of Receipt
	Mailing Address 201 W. Fort St.		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Detroit	MI	48226
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 5067 Amount of Each Receipt this Period <input type="text" value="1021.95"/> Interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5932.95"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="3020.63"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 39
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)**

<b>A.</b>	Full Name (Last, First, Middle Initial) Smith Barney		Date of Receipt
	Mailing Address 14th Street, NW		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 5062</b>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="3047.85"/>
		<input type="text" value="29442.18"/>	Interest

<b>B.</b>	Full Name (Last, First, Middle Initial) Smith Barney		Date of Receipt
	Mailing Address 14th Street, NW		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 98579-05959719419479</b>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="0.52"/>
		<input type="text" value="29442.18"/>	Interest

<b>C.</b>	Full Name (Last, First, Middle Initial) Smith Barney		Date of Receipt
	Mailing Address 14th Street, NW		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 98579-54005068540573</b>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="0.57"/>
		<input type="text" value="29442.18"/>	Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="3048.94"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 39
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)**

<b>A.</b>	Full Name (Last, First, Middle Initial) Smith Barney	Date of Receipt MM / DD / YYYY 05 / 31 / 2006
	Mailing Address 14th Street, NW	<b>Transaction ID:</b> 98579-20185488462448
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 16088.14
	FEC ID number of contributing federal political committee. <b>C</b>	Interest
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29442.18

<b>B.</b>	Full Name (Last, First, Middle Initial) Smith Barney	Date of Receipt MM / DD / YYYY 06 / 30 / 2006
	Mailing Address 14th Street, NW	<b>Transaction ID:</b> 5064
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 3885.15
	FEC ID number of contributing federal political committee. <b>C</b>	Interest
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29442.18

<b>C.</b>	Full Name (Last, First, Middle Initial) Smith Barney	Date of Receipt MM / DD / YYYY 06 / 30 / 2006
	Mailing Address 14th Street, NW	<b>Transaction ID:</b> 98579-40742129087448
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 0.59
	FEC ID number of contributing federal political committee. <b>C</b>	Interest
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29442.18

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>19973.88</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>26043.45</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)

<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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Resort Development Association</p> <p>Mailing Address 1201 15th Street NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Rent Salary Overhead</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V64143-6284295916557</p> <p>Date of Disbursement 04 / 11 / 2006</p> <p>Amount of Each Disbursement this Period 91498.07</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Resort Development Association</p> <p>Mailing Address 1201 15th Street NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Rent Salary Overhead</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V64143-3899652361869</p> <p>Date of Disbursement 05 / 01 / 2006</p> <p>Amount of Each Disbursement this Period 25000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Resort Development Association</p> <p>Mailing Address 1201 15th Street NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Rent Salary Overhead</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V64143-1666681170463</p> <p>Date of Disbursement 06 / 01 / 2006</p> <p>Amount of Each Disbursement this Period 25000.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>141498.07</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) ARDA-ROC	Transaction ID: V64143-6191064715385
	Mailing Address 1201 15th Street, NW Suite 400	Date of Disbursement MM / DD / YYYY 05 / 09 / 2006
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 126609.00
	Purpose of Disbursement Retainer & Fee for State Lobbying Contracts 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) ▼ Category/Type: 001	
<b>B.</b>	Full Name (Last, First, Middle Initial) Aventum	Transaction ID: V64143-6490594744682
	Mailing Address 1155 21st Street, NW Suite 330	Date of Disbursement MM / DD / YYYY 04 / 04 / 2006
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period 3019.37
	Purpose of Disbursement Retainer & Expenses for PAC 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) ▼ Category/Type: 001	
<b>C.</b>	Full Name (Last, First, Middle Initial) Aventum	Transaction ID: V64143-1501275897026
	Mailing Address 1155 21st Street, NW Suite 330	Date of Disbursement MM / DD / YYYY 05 / 30 / 2006
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period 6042.37
	Purpose of Disbursement Retainer & Expenses for PAC 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) ▼ Category/Type: 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	135670.74
<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bockorny Group, Inc.</p> <p>Mailing Address L Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Retainer and Expenses for Legislative Se Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V64143-4366418719291</p> <p>Date of Disbursement 04 / 04 / 2006</p> <p>Amount of Each Disbursement this Period 15431.59</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bockorny Group, Inc.</p> <p>Mailing Address L Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Retainer and Expenses for Legislative Se Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V64143-6880609393119</p> <p>Date of Disbursement 05 / 17 / 2006</p> <p>Amount of Each Disbursement this Period 15638.80</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bockorny Group, Inc.</p> <p>Mailing Address L Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Retainer and Expenses for Legislative Se Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V65852-0165826678276</p> <p>Date of Disbursement 06 / 13 / 2006</p> <p>Amount of Each Disbursement this Period 15016.00</p> <p>001 Category/Type</p>

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

46086.39

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Florida Tax Watch Mailing Address 106 North Bronough Street City Tallahassee State FL Zip Code 32302 Purpose of Disbursement Subscription Fees 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) ▼	Transaction ID: V64143-7206384539604 Date of Disbursement 04 / 11 / 2006
	Amount of Each Disbursement this Period 5000.00 Category/Type: 001
<b>B.</b> Full Name (Last, First, Middle Initial) Leading Authorities, Inc. Mailing Address 1220 L Street, NW Suite 850 City Washington State DC Zip Code 20005 Purpose of Disbursement Speaker Fees 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) ▼	Transaction ID: V64143-4903985857963 Date of Disbursement 05 / 17 / 2006
	Amount of Each Disbursement this Period 1701.40 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ..... ▶

6701.40

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

329956.60

# 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Back America's Conservatives PAC (BAC PAC) <hr/> Mailing Address 1251 Dartmouth Court <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	<b>Transaction ID:</b> 65876-6209222674369 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Baker for Congress Committee <hr/> Mailing Address Post Office Box 1694 <hr/> City Baton Rouge State LA Zip Code 70821 <hr/> Purpose of Disbursement Contribution Candidate Name Richard H. Baker <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06 <hr/> Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution	<b>Transaction ID:</b> 5154 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Barrett for Congress <hr/> Mailing Address PO Box 869 <hr/> City Westminster State SC Zip Code 29693 <hr/> Purpose of Disbursement Contribution Candidate Name James Gresham Barrett <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03 <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution	<b>Transaction ID:</b> 5139 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2500.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution

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

12500.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Ben Cardin for Senate <hr/> Mailing Address PO Box 21093 <hr/> City Catonsville State MD Zip Code 21228 <hr/> Purpose of Disbursement Contribution Candidate Name Benjamin L. Cardin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5131 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bill Shuster for Congress <hr/> Mailing Address PO Box 27 <hr/> City Hollidaysburg State PA Zip Code 16648 <hr/> Purpose of Disbursement Contribution Candidate Name Bill Shuster Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5386 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Chocola for Congress Inc. <hr/> Mailing Address PO Box 6728 <hr/> City South Bend State IN Zip Code 46660 <hr/> Purpose of Disbursement Contribution Candidate Name J. Christopher Chocola Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5068 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6
	Amount of Each Disbursement this Period 650.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10650.00
<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Chocola for Congress Inc. <hr/> Mailing Address PO Box 6728 <hr/> City South Bend State IN Zip Code 46660 <hr/> Purpose of Disbursement Contribution Candidate Name J. Christopher Chocola Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 02	<b>Transaction ID:</b> 5074 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6	Amount of Each Disbursement this Period 4350.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Committee To Re-Elect Vito Fossella <hr/> Mailing Address 34 Dumont Avenue <hr/> City Staten Island State NY Zip Code 10305 <hr/> Purpose of Disbursement Contribution Candidate Name Vito J. Fossella, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 13	<b>Transaction ID:</b> 5080 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6	Amount of Each Disbursement this Period 2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee <hr/> Mailing Address 120 Maryland Avenue NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	<b>Transaction ID:</b> 5079 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6	Amount of Each Disbursement this Period 15000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	21850.00
<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)

PAGE 16 / 39

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC) <hr/> Mailing Address 25 East Main Street, Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 5130 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Friends for Menor <hr/> Mailing Address 220 South King Street Ste 1770 <hr/> City Honolulu State HI Zip Code 96813 <hr/> Purpose of Disbursement Contribution Candidate Name Ron Menor <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 02 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 64143-4310418963432 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
	Amount of Each Disbursement this Period 2000.00
	011 Category/Type
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Hillary <hr/> Mailing Address 1133 Connecticut Avenue Suite 300 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Contribution Candidate Name Hillary Rodham Clinton <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 5077 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
	Amount of Each Disbursement this Period 4000.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution

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

11000.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Mark Foley</p> <p>Mailing Address 1316 Lake Victoria Dr</p> <p>City Lake Worth State FL Zip Code 33461</p> <p>Purpose of Disbursement Contribution Candidate Name Mark A. Foley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5111 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Mary Landrieu Inc</p> <p>Mailing Address 607 14th Street NW Suite 800 Suite 1434</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution Candidate Name Mary L. Landrieu</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5109 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Geoff Davis for Congress</p> <p>Mailing Address 3161 Dixie Highway Suite F</p> <p>City Erlanger State KY Zip Code 41018</p> <p>Purpose of Disbursement Contribution Candidate Name Geoffrey C. Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5129 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

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

9000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Heather Wilson for Congress	Transaction ID: 5126 Date of Disbursement 06 / 28 / 2006
	Mailing Address PO Box 14070	Amount of Each Disbursement this Period 2500.00
	City Albuquerque State NM Zip Code 87191	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Heather A. Wilson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) Hill PAC	Transaction ID: 5125 Date of Disbursement 06 / 28 / 2006
	Mailing Address 1133 Connecticut Avenue, N.W. Suite 300	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20036	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) J D Hayworth for Congress	Transaction ID: 5095 Date of Disbursement 06 / 28 / 2006
	Mailing Address 10789 N 90th Street Suite 102	Amount of Each Disbursement this Period 5000.00
	City Scottsdale State AZ Zip Code 85260	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name JD Hayworth Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

12500.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jerry Weller for Congress, Inc.</p> <p>Mailing Address 610 S. Boulevard</p> <p>City Tampa State FL Zip Code 33606</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Gerald C. Weller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 11</p>	<p><b>Transaction ID:</b> 5121 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jim Gerlach for Congress Committee</p> <p>Mailing Address PO Box 87</p> <p>City Uwchland State PA Zip Code 19480</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name James W. Gerlach</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 06</p>	<p><b>Transaction ID:</b> 5128 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Larson for Congress</p> <p>Mailing Address 29 Ruff Circle</p> <p>City Glastonbury State CT Zip Code 06033</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name John B. Larson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 01</p>	<p><b>Transaction ID:</b> 5123 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

8500.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Leahy Green Mountain Victory Fund</p> <p>Mailing Address 10 G Street Northeast Suite 470</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5114 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Martinez for Senate</p> <p>Mailing Address 610 S Boulevard</p> <p>City Tampa State FL Zip Code 33606</p> <p>Purpose of Disbursement Contribution Candidate Name Mel Martinez</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5103 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) McCrery for Congress Committee</p> <p>Mailing Address Post Office Box 52956 333 Texas Street Suite 1900</p> <p>City Shreveport State LA Zip Code 71135</p> <p>Purpose of Disbursement contribution Candidate Name Jim McCrery</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5107 <b>Date of Disbursement</b> 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>

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

10000.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Menendez for Senate		Transaction ID: 5381	
	Mailing Address PO Box 848		Date of Disbursement 06 / 28 / 2006	
	City Union City	State NJ	Zip Code 07087	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Robert Menendez				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District:				
<b>B.</b>	Full Name (Last, First, Middle Initial) Nelson 2006		Transaction ID: 5387	
	Mailing Address PO Box 8666		Date of Disbursement 06 / 28 / 2006	
	City Omaha	State NE	Zip Code 68108	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Ben Nelson				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NE District:				
<b>C.</b>	Full Name (Last, First, Middle Initial) New York State Democratic Committee		Transaction ID: 5143	
	Mailing Address 461 Park Avenue South 10th Floor		Date of Disbursement 06 / 28 / 2006	
	City New York	State NY	Zip Code 10016	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:		Contribution		

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

13000.00

**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 22 / 39

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Our Common Values PAC <hr/> Mailing Address 101 W. Grand Ave. Suite 200 <hr/> City Chicago State IL Zip Code 60610 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 5087 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) PAC To the Future <hr/> Mailing Address Pmb 3230 268 Bush Street <hr/> City San Francisco State CA Zip Code 94104 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 65876-1318323016166 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Promoting Republicans You Can Elect Political Action Co- mmittee <hr/> Mailing Address 1155 21st Street NW Suite 300 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 65876-7583886981010 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 <hr/> Amount of Each Disbursement this Period 5000.00
	011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<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)

PAGE 23 / 39

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Reed Committee</p> <p>Mailing Address PO Box 8628</p> <p>City Cranston State RI Zip Code 02920</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Jack Reed</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5101</p> <p>Date of Disbursement 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard Pombo for Congress</p> <p>Mailing Address 2150 River Plaza Dr. #150 Suite 1560</p> <p>City Sacramento State CA Zip Code 95833</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Richard Pombo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 5099</p> <p>Date of Disbursement 06 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sonoma Restaurant</p> <p>Mailing Address 223 Pennsylvania Avenue, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Reception</p> <p>Candidate Name Mark A. Foley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V64143-6761743426323</p> <p>Date of Disbursement 06 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 1330.00</p> <p>In-Kind</p>

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

9330.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Talent for Senate Committee  Mailing Address 9467 Dielman Rock Island Drive  City Saint Louis State MO Zip Code 63132  Purpose of Disbursement Contribution Candidate Name James Matthes Talent Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:  Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 5119 Date of Disbursement 06 / 28 / 2006  Amount of Each Disbursement this Period 5000.00  011 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Tim Johnson for South Dakota Inc  Mailing Address PO Box 1536  City Sioux Falls State SD Zip Code 57101  Purpose of Disbursement Contribution Candidate Name Tim Johnson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 5091 Date of Disbursement 06 / 28 / 2006  Amount of Each Disbursement this Period 2000.00  011 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Together for Our Majority Political Action Committee (T-OMPAC)  Mailing Address PO Box 16488  City Arlington State VA Zip Code 22215  Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 5089 Date of Disbursement 06 / 28 / 2006  Amount of Each Disbursement this Period 5000.00  011 Category/ Type	

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

12000.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Tom Allen for Senate	Transaction ID: 5092 Date of Disbursement 06 / 28 / 2006
	Mailing Address 550 Forest Ave Suite 101	Amount of Each Disbursement this Period 2500.00
	City Portland State ME Zip Code 04101	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Thomas H. Allen	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) Tom Campbell for Congress	Transaction ID: 5133 Date of Disbursement 06 / 28 / 2006
	Mailing Address 1116 Foothill Street	Amount of Each Disbursement this Period 5000.00
	City Redwood City State CA Zip Code 94061-1917	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Tom Campbell	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) Van Hollen for Congress	Transaction ID: 5071 Date of Disbursement 04 / 05 / 2006
	Mailing Address 10537 St. Paul Street	Amount of Each Disbursement this Period 5000.00
	City Kensington State MD Zip Code 20895	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name Chris Van Hollen	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

12500.00

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

157830.00

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

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FOR LINE NUMBER: (check only one)

<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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) ARV '05	Transaction ID: 64143-5908471941947 Date of Disbursement MM / DD / YYYY 04 / 18 / 2006
	Mailing Address 101 Gibraltar Drive Suite 1B	Amount of Each Disbursement this Period 500.00
	City Morris Plains State NJ Zip Code 07950	
	Purpose of Disbursement Nonfederal Contribution Candidate Name	011 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.	Full Name (Last, First, Middle Initial) Bass for Assembly 2006	Transaction ID: 64143-8446466326713 Date of Disbursement MM / DD / YYYY 04 / 18 / 2006
	Mailing Address 1100 O Street #200	Amount of Each Disbursement this Period 1000.00
	City Sacramento State CA Zip Code 95814	
	Purpose of Disbursement Nonfederal Contribution Candidate Name	011 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) ▼

C.	Full Name (Last, First, Middle Initial) Benoit for Assembly 2006	Transaction ID: 64143-1499902606010 Date of Disbursement MM / DD / YYYY 04 / 18 / 2006
	Mailing Address P.O. Box 471	Amount of Each Disbursement this Period 2000.00
	City Sacramento State CA Zip Code 95812	
	Purpose of Disbursement Nonfederal Contribution Candidate Name	011 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) .....	3500.00
<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 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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Bredesen Inaugural Committee Inc.  Mailing Address 1 Music Circle N. #301  City Nashville State TN Zip Code 37203  Purpose of Disbursement Nonfederal Contribution 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>Transaction ID:</b> 65876-9326745867729 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6	<b>Amount of Each Disbursement this Period</b> 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) California Taxpayers for Jerome Horton  Mailing Address 1107 9th Street #901  City Sacramento State CA Zip Code 95814  Purpose of Disbursement Nonfederal Contribution 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>Transaction ID:</b> 64143-9051629900932 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6	<b>Amount of Each Disbursement this Period</b> 3000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Californians for Schwarzenegger  Mailing Address PO Box 471  City Sacramento State CA Zip Code 95812  Purpose of Disbursement Nonfederal Contribution 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>Transaction ID:</b> 64143-6751825213432 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6	<b>Amount of Each Disbursement this Period</b> 5000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>13000.00</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)

PAGE 28 / 39

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Christel House <hr/> Mailing Address 10 West Market Street <hr/> City Indianapolis State IN Zip Code 46204 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V64143-9761468768119 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
	Amount of Each Disbursement this Period 10000.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Democratic Assembly Campaign Committee <hr/> Mailing Address PO Box 3712 <hr/> City Trenton State NJ Zip Code 08629 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-7014886736869 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Election Fund of Gill for Senate <hr/> Mailing Address 161 Virginia Street <hr/> City Hillside State NJ Zip Code 08527 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-7612268328666 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

13000.00

**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)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Election Fund of Robert W. Singer	Transaction ID: 64143-9904138445854 Date of Disbursement																				
	Mailing Address 3 North Dakota Court	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	8	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	1	8	/	2	0	0	6													
	City Jackson State NJ Zip Code 08527	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
	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) ▼																				
		011 Category/ Type																				
<b>B.</b>	Full Name (Last, First, Middle Initial) Families for Cindy Montanez 2006	Transaction ID: 64143-4198419451713 Date of Disbursement																				
	Mailing Address 1100 O Street #200	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	8	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	1	8	/	2	0	0	6													
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00																			
3000.00																						
	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) ▼																				
		011 Category/ Type																				
<b>C.</b>	Full Name (Last, First, Middle Initial) Florida Democratic Party	Transaction ID: 65876-0750848650932 Date of Disbursement																				
	Mailing Address 214 South Bronough Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	2	2	/	2	0	0	6													
	City Tallahassee State FL Zip Code 32301	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																			
2500.00																						
	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) ▼																				
		011 Category/ Type																				

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Friends of Bonnie Garcia	Transaction ID: 64143-3106500506401
	Mailing Address P.O. Box 1565	Date of Disbursement 04 / 18 / 2006
	City Oakdale State CA Zip Code 95361	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Nonfederal Contribution Candidate Name	011 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.	Full Name (Last, First, Middle Initial) Friends of Dario Frommer	Transaction ID: 64143-0582544207572
	Mailing Address 1100 O St. #200	Date of Disbursement 04 / 18 / 2006
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Nonfederal Contribution Candidate Name	011 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) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Don Perata	Transaction ID: 64143-5715143084526
	Mailing Address PO Box	Date of Disbursement 04 / 18 / 2006
	City Sacramento State CA Zip Code 95864	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Nonfederal Contribution Candidate Name	011 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) .....	7000.00
<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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Gloria Negrete McLeod Senate 2006  Mailing Address 1005 12th Street Suite H  City Sacramento State CA Zip Code 95814  Purpose of Disbursement Nonfederal Contribution 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) ▼	Transaction ID: 64143-8773919939994 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6  Amount of Each Disbursement this Period 3000.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) House Democratic Campaign Committee  Mailing Address PO Box 2021  City Augusta State ME Zip Code 04338  Purpose of Disbursement Nonfederal Contribution 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) ▼	Transaction ID: 64143-9125482439994 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Jeff Denham for Senate, 2006  Mailing Address 2150 River Plaza Drive #150  City Sacramento State CA Zip Code 95833  Purpose of Disbursement Nonfederal Contribution 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) ▼	Transaction ID: 64143-3715631365776 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6  Amount of Each Disbursement this Period 2000.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<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 32 / 39

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Joe Coto for Assembly <hr/> Mailing Address 1127 11th St. #606 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> 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>Transaction ID:</b> 64143-6936151385307 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6 <hr/> <b>Amount of Each Disbursement this Period</b> 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Liz Figueroa for Lieutenant Governor <hr/> Mailing Address 1005 12th St. Suite H <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> 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>Transaction ID:</b> 64143-1098291277885 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6 <hr/> <b>Amount of Each Disbursement this Period</b> 2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Lockyer for Treasurer <hr/> Mailing Address 1801 Avenue of the Stars, Ste 825 <hr/> City Los Angeles State CA Zip Code 90067 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> 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>Transaction ID:</b> 64143-0817987322807 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6 <hr/> <b>Amount of Each Disbursement this Period</b> 5300.00

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

8300.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 39

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Louis D. Greenwald for Assembly	Transaction ID: 64143-1891290545463
	Mailing Address 2240-15 Route 70	Date of Disbursement MM / DD / YYYY 04 / 18 / 2006
	City State Zip Code Cherry Hill NJ 08002	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Nonfederal Contribution	011 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.	Full Name (Last, First, Middle Initial) Maine Senate Republicans	Transaction ID: 64143-5638543963432
	Mailing Address PO Box 5004	Date of Disbursement MM / DD / YYYY 06 / 01 / 2006
	City State Zip Code Augusta ME 04332	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Nonfederal Contribution	011 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:	
C.	Full Name (Last, First, Middle Initial) Mark Leno for Senate 2008	Transaction ID: 64143-3280298113822
	Mailing Address 9211 11th Street #904	Date of Disbursement MM / DD / YYYY 04 / 18 / 2006
	City State Zip Code Sacramento CA 95814	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Nonfederal Contribution	011 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:	

SUBTOTAL of Disbursements This Page (optional) ..... ▶

3500.00

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)

<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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b>	Full Name (Last, First, Middle Initial) Moore for Governor		<b>Transaction ID:</b> 64143-9456750750541	
	Mailing Address PO Box 749		Date of Disbursement 05 / 02 / 2006	
	City Raleigh	State NC	Zip Code 27602	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
<b>B.</b>	Full Name (Last, First, Middle Initial) Nicole Parra for Assembly 2006		<b>Transaction ID:</b> 64143-1185266375541	
	Mailing Address 2005 N Street		Date of Disbursement 04 / 18 / 2006	
	City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
<b>C.</b>	Full Name (Last, First, Middle Initial) Poochigian for Attorney General		<b>Transaction ID:</b> 64143-3835107684135	
	Mailing Address P.O. Box 8466		Date of Disbursement 04 / 18 / 2006	
	City Fresno	State CA	Zip Code 93747	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Re-Elect Senator Carole Migden <hr/> Mailing Address 1127 11th Street #606 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-8986169695854 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2000.00
	011 Category/Type
	State: District:
<b>B.</b> Full Name (Last, First, Middle Initial) Rick Keene for Assembly 2006 <hr/> Mailing Address P.O. Box 984 <hr/> City Willows State CA Zip Code 95988 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-8064233660698 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2000.00
	011 Category/Type
	State: District:
<b>C.</b> Full Name (Last, First, Middle Initial) Ron Calderon for Senate <hr/> Mailing Address 14991 Lago Drive <hr/> City Rancho Murieta State CA Zip Code 95683 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-6248742938041 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 2000.00
	011 Category/Type
	State: District:

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

6000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Senate Democratic Campaign Committee <hr/> Mailing Address PO Box 237 <hr/> City Augusta State ME Zip Code 04332 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-1455957293510 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Senate Democratic Majority <hr/> Mailing Address 215-2 Beachfront <hr/> City Manasquan State NJ Zip Code 08736 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-9553338885307 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 1500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Senate Republican Majority <hr/> Mailing Address 370 Tall Tree Court <hr/> City Jackson State NJ Zip Code 08527 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 64143-5288354754447 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3500.00

**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)

<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)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<b>A.</b> Full Name (Last, First, Middle Initial) Taxpayers for Ackerman <hr/> Mailing Address 1200 K Street Suite 740 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> 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) ▼	Transaction ID: 64143-0413171648979 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) The Election Fund of Raymond J. Lesniak <hr/> Mailing Address 985 Stuyvesant Avenue <hr/> City Union State NJ Zip Code 07083 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> 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) ▼	Transaction ID: 64143-6376306414604 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) The Election Fund of Senator Codey <hr/> Mailing Address 449 Mt. Pleasant Avenue Suite 102 <hr/> City West Orange State NJ Zip Code 07052 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> 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) ▼	Transaction ID: 64143-7512323260307 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.

Full Name (Last, First, Middle Initial)  
The Election Fund of Wilfredo Caraballo

Mailing Address 37 Greenwood Lake Street

City Newark State NJ Zip Code 07104

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 64143-3058130145072

Date of Disbursement

04 / 18 / 2006

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
World's Windows Inc.

Mailing Address 7 Eastwood Dr.

City Ballston Lake State NY Zip Code 12019

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: V65876-4294397234916

Date of Disbursement

06 / 28 / 2006

Amount of Each Disbursement this Period

2500.00

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

3000.00

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

84300.00

Form/Schedule: **F3X**  
Transaction ID:

Operating expenditures listed in the report were incurred on behalf of ARDA PAC. If a contribution was made to, or expenditure made on behalf of, another committee, that would be noted in the report.

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