

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 Women's Alliance for Israel Political Action Committee

ADDRESS (number and street) 30151 Tomas Check if different than previously reported. (ACC) RanchoStaMargarita CA 92688

2. FEC IDENTIFICATION NUMBER C00236596 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2006 through 10 18 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 Betty Presley

Signature of Treasurer Electronically Filed by Betty Presley Date 10 26 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Women's Alliance for Israel Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		275049.06
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	254974.23									
(c) Total Receipts (from Line 19) .....	180.00	152192.47								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	255154.23	427241.53								
7. Total Disbursements (from Line 31) .....	51369.54	223456.84								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	203784.69	203784.69								
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) .....	1745.00									

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  
Women's Alliance for Israel Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	112045.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	180.00	36225.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	180.00	148270.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	180.00	148270.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	3922.47
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)) .....	180.00	152192.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	180.00	152192.47

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	1369.54	66456.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1369.54	66456.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	156500.00
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	500.00
(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	500.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	51369.54	223456.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	51369.54	223456.84

**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) .....	180.00	148270.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	180.00	147770.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1369.54	66456.84
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1369.54	66456.84

**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

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)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Northern Leasing</b>		<b>Transaction ID: EXP.B.1876</b>																					
Mailing Address      Payment Center		Date of Disbursement																					
City      State      Zip Code Los Angeles      CA      90001		<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>1</td><td>0</td><td>/</td><td>0</td><td>3</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	1	0	/	0	3	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	3	/	2	0	0	6														
Purpose of Disbursement Card Machine Lease		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">37.14</td> </tr> </table>		37.14																			
37.14																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State:      District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General																					
		<input type="checkbox"/> Other (specify) ▼																					
		<table border="1"> <tr> <td colspan="2" style="text-align: center;">001</td> </tr> <tr> <td colspan="2" style="text-align: center;">Category/ Type</td> </tr> </table>		001		Category/ Type																	
001																							
Category/ Type																							

Full Name (Last, First, Middle Initial) <b>B. Paymentech</b>		<b>Transaction ID: EXP.B.1994</b>																					
Mailing Address      PO Box 6600		Date of Disbursement																					
City      State      Zip Code Hagerstown      MD      21741		<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>1</td><td>0</td><td>/</td><td>0</td><td>5</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	1	0	/	0	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	5	/	2	0	0	6														
Purpose of Disbursement Processing Fees		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">112.14</td> </tr> </table>		112.14																			
112.14																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State:      District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General																					
		<input type="checkbox"/> Other (specify) ▼																					
		<table border="1"> <tr> <td colspan="2" style="text-align: center;">001</td> </tr> <tr> <td colspan="2" style="text-align: center;">Category/ Type</td> </tr> </table>		001		Category/ Type																	
001																							
Category/ Type																							

Full Name (Last, First, Middle Initial) <b>C. Beverly Hills Postal Center</b>		<b>Transaction ID: EXP.B.2029</b>																					
Mailing Address      8306 Wilshire Blvd		Date of Disbursement																					
City      State      Zip Code Beverly Hills      CA      90211		<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>1</td><td>0</td><td>/</td><td>1</td><td>3</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	1	0	/	1	3	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	3	/	2	0	0	6														
Purpose of Disbursement Postal Box 1579		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">57.00</td> </tr> </table>		57.00																			
57.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State:      District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General																					
		<input type="checkbox"/> Other (specify) ▼																					
		<table border="1"> <tr> <td colspan="2" style="text-align: center;">001</td> </tr> <tr> <td colspan="2" style="text-align: center;">Category/ Type</td> </tr> </table>		001		Category/ Type																	
001																							
Category/ Type																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>206.28</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 7 / 17

<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

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)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Employers Resource</b>		<b>Transaction ID:</b> EXP.B.2006 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 160 Chesterfield Drive Suite 9		Amount of Each Disbursement this Period 1133.20
City Cardiff State CA Zip Code 92007	001 Category/ Type	
Purpose of Disbursement PAC Staff Salaries Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		<b>Transaction ID:</b> EXP.B.2007 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address Payment Center		Amount of Each Disbursement this Period 30.06
City Memphis State TN Zip Code 38101	001 Category/ Type	
Purpose of Disbursement Shipping Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1163.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1369.54

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

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

FOR LINE NUMBER:  
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Campbell for Congress</b>		Transaction ID: EXP:B:2003 Date of Disbursement 10 / 06 / 2006	
Mailing Address 4590 MacArthur Blvd, #500		Amount of Each Disbursement this Period 1000.00	
City Irvine State CA Zip Code 92660	Purpose of Disbursement Contribution 011 Category/ Type	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48	Candidate Name John Campbell		

Full Name (Last, First, Middle Initial) <b>B. Dewine for US Senate</b>		Transaction ID: EXP:B:2002 Date of Disbursement 10 / 06 / 2006	
Mailing Address PO Box 340188		Amount of Each Disbursement this Period 4500.00	
City Columbus State OH Zip Code 43234	Purpose of Disbursement Contribution 011 Category/ Type	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 1	Candidate Name Mike Dewine		

Full Name (Last, First, Middle Initial) <b>C. Hastert for Congress Committee</b>		Transaction ID: EXP:B:2000 Date of Disbursement 10 / 06 / 2006	
Mailing Address PO Box 625		Amount of Each Disbursement this Period 3000.00	
City Batavia State IL Zip Code 60510	Purpose of Disbursement Contribution 011 Category/ Type	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Candidate Name Dennis Hastert		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Hatch Election Committee</b>		<b>Transaction ID: EXP:B:1999</b> Date of Disbursement																					
Mailing Address 175 South West Temple Suite 650		<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>1</td><td>0</td><td>/</td><td>0</td><td>6</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	1	0	/	0	6	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	6	/	2	0	0	6														
City Salt Lake City	State UT	Zip Code 84101	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		<input type="checkbox"/> 011	<input type="text" value="2000.00"/>																				
Candidate Name Orrin Hatch		Category/ Type																					
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: UT	District:																						

Full Name (Last, First, Middle Initial) <b>B. Jim Gerlach for Congress</b>		<b>Transaction ID: EXP:B:2001</b> Date of Disbursement																					
Mailing Address PO Box 87		<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>1</td><td>0</td><td>/</td><td>0</td><td>6</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	1	0	/	0	6	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	6	/	2	0	0	6														
City Uwchland	State PA	Zip Code 19480	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		<input type="checkbox"/> 011	<input type="text" value="1000.00"/>																				
Candidate Name Jim Gerlach		Category/ Type																					
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: 6																						

Full Name (Last, First, Middle Initial) <b>C. Mary Bono for Committee</b>		<b>Transaction ID: EXP:B:2004</b> Date of Disbursement																					
Mailing Address PO Box 3370		<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>1</td><td>0</td><td>/</td><td>0</td><td>6</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	1	0	/	0	6	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	6	/	2	0	0	6														
City Palm Springs	State CA	Zip Code 92263	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		<input type="checkbox"/> 011	<input type="text" value="2500.00"/>																				
Candidate Name Mary Bono		Category/ Type																					
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: CA	District: 45																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 17

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. The Markey Committee</b>		Transaction ID: EXP:B:1998 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address PO Box 526		Amount of Each Disbursement this Period 1000.00
City Medford	State MA	
Zip Code 02155		
Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Ed Markey		
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: MA District: 7		

Full Name (Last, First, Middle Initial) <b>B. Becerra for Congress</b>		Transaction ID: EXP:B:2011 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address PO Box 261060		Amount of Each Disbursement this Period 1000.00
City Los Angeles	State CA	
Zip Code 90026		
Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Xavier Beverra		
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: CA District: 31		

Full Name (Last, First, Middle Initial) <b>C. Boswell for Congress</b>		Transaction ID: EXP:B:2025 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address PO Box 6220		Amount of Each Disbursement this Period 1000.00
City Des Moines	State IA	
Zip Code 50309		
Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Leonard Boswell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District:		

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Charlie Melancon Campaign Committee</b>		<b>Transaction ID: EXP:B:2026</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 511 Congress Street		Amount of Each Disbursement this Period 3500.00
City Napoleonville	State LA	
Zip Code 70390	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name Charlie Melancon 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: LA District: 3		

Full Name (Last, First, Middle Initial) <b>B. Friends of Clay Shaw</b>		<b>Transaction ID: EXP:B:2012</b> Date of Disbursement 10 / 13 / 2006
Mailing Address 2600 NE 14th Street Causeway		Amount of Each Disbursement this Period 1000.00
City Ft Lauderdale	State FL	
Zip Code 33303	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name E. Clay Shaw, Jr 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: FL District: 22		

Full Name (Last, First, Middle Initial) <b>C. Friends of Jim Marshall</b>		<b>Transaction ID: EXP:B:2024</b> Date of Disbursement 10 / 13 / 2006
Mailing Address PO Box 125		Amount of Each Disbursement this Period 1000.00
City Macon	State GA	
Zip Code 31201	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name Jim Marshall 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: GA District: 3		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<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

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)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Friends of Mike Sodrel</b>		<b>Transaction ID:</b> EXP:B:2013 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 702 North Shore Drive, #500		Amount of Each Disbursement this Period 1000.00
City Jeffersonville State IN Zip Code 47130	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Mike Sodrel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Herseth for Congress</b>		<b>Transaction ID:</b> EXP:B:2016 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address PO Box 2009		Amount of Each Disbursement this Period 1500.00
City Sioux Falls State SD Zip Code 57101	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Stephanie Herseth		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. John Salazar for Congress</b>		<b>Transaction ID:</b> EXP:B:2027 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address PO Box 534		Amount of Each Disbursement this Period 2500.00
City Pueblo State CO Zip Code 81002	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name John Salazar		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 3	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) ..... ▶	5000.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Nancy Pelosi for Congress</b>		<b>Transaction ID: EXP:B:2008</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 450 Golden Gate Ave		Amount of Each Disbursement this Period 1000.00
City San Francisco State CA Zip Code 94102		
Purpose of Disbursement Contribution Candidate Name Nancy Pelosi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Solis for Congress</b>		<b>Transaction ID: EXP:B:2010</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 6380 Wilshire Blvd #1612		Amount of Each Disbursement this Period 1500.00
City Los Angeles State CA Zip Code 90048		
Purpose of Disbursement Contribution Candidate Name Hilda Solis	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Trent Lott for Mississippi</b>		<b>Transaction ID: EXP:B:2015</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address PO Box 22824		Amount of Each Disbursement this Period 2500.00
City Jackson State MS Zip Code 39225		
Purpose of Disbursement Contribution Candidate Name Trent Lott	011 Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District:	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) ..... ▶	5000.00
<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 14 / 17

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Whitehouse '06</b>		Transaction ID: EXP:B:2009 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 100 Midway Place, Office 23		Amount of Each Disbursement this Period 5000.00	
City Cranston State RI Zip Code 02920	Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Sheldon Whitehouse			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ellsworth for Congress</b>		Transaction ID: EXP:B:2021 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address PO Box 62		Amount of Each Disbursement this Period 2000.00	
City Evansville State IN Zip Code 47708	Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Brad Ellsworth			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Fitzpatrick for Congress</b>		Transaction ID: EXP:B:2022 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 115 N Broad Street		Amount of Each Disbursement this Period 3500.00	
City Doylestown State PA Zip Code 18901	Purpose of Disbursement Contribution 011 Category/Type		
Candidate Name Michael G. Fitzpatrick			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 8	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) ..... ▶	10500.00
<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 15 / 17

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Friends of John Barrow</b>		<b>Transaction ID: EXP:B:2023</b> Date of Disbursement 10 / 17 / 2006
Mailing Address PO Box 8166		Amount of Each Disbursement this Period 1000.00
City Savannah State GA Zip Code 31412	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name John Barrow		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jim Gerlach for Congress</b>		<b>Transaction ID: EXP:B:2020</b> Date of Disbursement 10 / 17 / 2006
Mailing Address PO Box 87		Amount of Each Disbursement this Period 2500.00
City Uwchland State PA Zip Code 19480	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Jim Gerlach		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Menendez for Congress</b>		<b>Transaction ID: EXP:B:2019</b> Date of Disbursement 10 / 17 / 2006
Mailing Address PO Box 848		Amount of Each Disbursement this Period 1500.00
City Union City State NJ Zip Code 07087	011 Category/ Type	
Purpose of Disbursement Contributon		
Candidate Name Robert Menendez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	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) ..... ▶	5000.00
<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 / 17

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Rick Renzi for Congress</b>		<b>Transaction ID: EXP:B:2017</b>	
Mailing Address PO Box 2383		Date of Disbursement 10 / 17 / 2006	
City Prescott	State AZ	Zip Code 86302	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Rick Renzi			
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: AZ	District: 1		

Full Name (Last, First, Middle Initial) <b>B. Simmons for Congress</b>		<b>Transaction ID: EXP:B:2018</b>	
Mailing Address PO Box 268		Date of Disbursement 10 / 17 / 2006	
City Stonington	State CT	Zip Code 06378	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Rob Simmons			
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: CT	District: 2		

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

2000.00

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

50000.00



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 / 17	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Women's Alliance for Israel Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Betty Presley & Associates, Inc.	Nature of Debt (Purpose): Financial Analyst
Mailing Address 30151 Tomas	
City State ZIP Code RanchoStaMargarita CA 92688	

Outstanding Balance Beginning This Period	<b>Transaction ID: PAY:D:2005</b>	
1745.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1745.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1745.00
2) <b>TOTALS</b> This Period (last page this line number only).....	1745.00
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	