

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
2006 JOINT CANDIDATE COMMITTEE

ADDRESS (number and street) 228 S WASHINGTON ST STE 115
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00423590
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 11 08 2006 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 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 Lisa Lisker

Signature of Treasurer Electronically Filed by Lisa Lisker Date 01 12 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
2006 JOINT CANDIDATE 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		0.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	1034201.77									
(c) Total Receipts (from Line 19)	907600.00	2020000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1941801.77	2020000.00								
7. Total Disbursements (from Line 31)	1910651.78	1988850.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31149.99	31149.99								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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
2006 JOINT CANDIDATE 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	835600.00	1618350.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	835600.00	1618350.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	72000.00	401650.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	907600.00	2020000.00
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	907600.00	2020000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	907600.00	2020000.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	69245.34	146693.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	69245.34	146693.57
22. Transfers to Affiliated/Other Party Committees.....	1821406.44	1821406.44
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	20000.00	20000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	750.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	20000.00	20750.00
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))..	1910651.78	1988850.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1910651.78	1988850.01

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	907600.00	2020000.00
34. Total Contribution Refunds (from Line 28(d))	20000.00	20750.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	887600.00	1999250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	69245.34	146693.57
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	69245.34	146693.57

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHERINE H. ALDEN

Mailing Address 1100 ALMA STREET

City State Zip Code
MENLO PARK CA 94025

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

Name of Employer Woodside Hotels & Resorts
Occupation Hotelier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2006

Transaction ID: SA.1

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID C. ALLEN

Mailing Address 2029 CENTURY PARK EAST

City State Zip Code
LOS ANGELES CA 90067

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

Name of Employer Akin Gump
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2006

Transaction ID: SA.2

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. RICK L. BURDICK

Mailing Address 1099 LANGLEY FORK LANE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Akin Gump
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2006

Transaction ID: SA.5

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. PAUL BUTLER

Mailing Address 7012 GREEN OAKS DRIVE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.6

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MRS. KATHARYN S. COOK

Mailing Address 74615 WREN DRIVE

City State Zip Code
INDIAN WELLS CA 92210

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.7

Amount of Each Receipt this Period
25000.00

C. Full Name (Last, First, Middle Initial)
MR. LEO W. COOK

Mailing Address 74615 WREN DRIVE

City State Zip Code
INDIAN WELLS CA 92210

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.8

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional)	51000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. SMITH W. DAVIS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 1333 NEW HAMPSHIRE AVE NW		Transaction ID: SA.9 Amount of Each Receipt this Period 1000.00
City WASHINGTON	State Zip Code DC 20036	
FEC ID number of contributing federal political committee. C		
Name of Employer Akin Gump	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. FRANCES DEJOY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address PO BOX 18367		Transaction ID: SA.10 Amount of Each Receipt this Period 13600.00
City GREENSBORO	State Zip Code NC 27419	
FEC ID number of contributing federal political committee. C		
Name of Employer New Breed Corporation	Occupation Financial Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 13600.00	

Full Name (Last, First, Middle Initial) C. MR. MICHAEL DEJOY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address PO BOX 18367		Transaction ID: SA.11 Amount of Each Receipt this Period 15400.00
City GREENSBORO	State Zip Code NC 27419	
FEC ID number of contributing federal political committee. C		
Name of Employer Swiss Real Estate Asset Management	Occupation Accountant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15400.00	

SUBTOTAL of Receipts This Page (optional) ▶	30000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. DAVID A. DONOHOE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 1338 NEW HAMPSHIRE AVE NW		Transaction ID: SA.12	
City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Akin Gump	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. MRS. CAROLE L. DOWD		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 1529 CROWELL ROAD		Transaction ID: SA.13	
City State Zip Code VIENNA VA 22182	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Northern Virginia Mediation	Occupation Mediator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. MRS. EVA P. ELKINS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 1677 N. DOHENY DRIVE		Transaction ID: SA.14	
City State Zip Code LOS ANGELES CA 90069	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional) ▶	16000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ALAN B. FABIAN

Mailing Address 2 BRETT MANOR COURT

City State Zip Code
HUNT VALLEY MD 21030

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

Name of Employer
Center for Management Technology

Occupation
Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.16

Amount of Each Receipt this Period
20000.00

B. Full Name (Last, First, Middle Initial)
MR. BRADFORD M. FREEMAN

Mailing Address 11100 SANTA MONICA BLVD

City State Zip Code
LOS ANGELES CA 90025

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

Name of Employer
Freeman Spogli & Co.

Occupation
Investment Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20700.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.17

Amount of Each Receipt this Period
20700.00

C. Full Name (Last, First, Middle Initial)
MR. DAN FRIEDKIN

Mailing Address PO BOX 4718

City State Zip Code
HOUSTON TX 77210

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

Name of Employer
The Friedkin Corp.

Occupation
Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.18

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional)	65700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. ORRIN HARRISON, III		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 3624 NORMANDY		Transaction ID: SA.19	
City State Zip Code DALLAS TX 75205	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Akin Gump	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. SEEME HASAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 1607 N. ELIZABETH STREET		Transaction ID: SA.20	
City State Zip Code PUEBLO CO 81003	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) C. MR. DAVID L. HUNTER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 13482 SUNSET LAKES CIRCLE		Transaction ID: SA.22	
City State Zip Code WINTER GARDEN FL 34787	Amount of Each Receipt this Period 15000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Real Estate Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		

SUBTOTAL of Receipts This Page (optional) ▶	26000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ED INGLE

Mailing Address 2101 ARROWLEAF DRIVE

City State Zip Code
VIENNA VA 22182

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

Name of Employer Occupation
Microsoft Corp. Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.23

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
MR. MARK JOHNSON

Mailing Address P.O. BOX 17729

City State Zip Code
ANAHEIM CA 92817

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

Name of Employer Occupation
Chapin Medical Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.24

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
MR. E. FLOYD KVAMME

Mailing Address 19490 GLEN UNA DRIVE

City State Zip Code
SARATOGA CA 95070

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

Name of Employer Occupation
Kleiner, Perkins, Caufield & Byers Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.25

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional)	▶	40000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. JEAN KVAMME

Mailing Address 19490 GLEN UNA DRIVE

City State Zip Code
SARATOGA CA 95070

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

Name of Employer
E. Floyd & Jean Kvamme Foundation

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.26

Amount of Each Receipt this Period
25000.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES D. LARIZZI

Mailing Address 5065 AVALON RIDGE PARKWAY

City State Zip Code
NORCROSS GA 30071

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

Name of Employer
Peachtree Settlement Fund-ing

Occupation
Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.27

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
MRS. SUSAN HECK LENT

Mailing Address 3529 MALVERIN COURT

City State Zip Code
ALEXANDRIA VA 22304

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

Name of Employer
Akin Gump

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.28

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	40500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL J. MADIGAN

Mailing Address 3910 HILLANDALE COURT NW

City State Zip Code
WASHINGTON DC 20007

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.29

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. FREDERIC V. MALEK

Mailing Address 1259 CREST LANE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Occupation
Thayer Capital Partners Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
16000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.30

Amount of Each Receipt this Period
16000.00

C. Full Name (Last, First, Middle Initial)
MRS. MARLENE A. MALEK

Mailing Address 1259 CREST LANE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Occupation
National Council Advisory Board Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.31

Amount of Each Receipt this Period
20000.00

SUBTOTAL of Receipts This Page (optional)	37000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. WILLIAM MCCREERY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 36 AXTELL DRIVE		Transaction ID: SA.32	
City State Zip Code SCARSDALE NY 10583	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Occupation Attorney	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS. MARY ANN MCDONALD		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address FOUR EMBARCADERO CENTER		Transaction ID: SA.33	
City State Zip Code SAN FRANCISCO CA 94111	Amount of Each Receipt this Period 13000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RCM Capital Management Occupation Investment Management	Aggregate Year-to-Date ▼ 13000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. BURTON MCMURTRY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 620 SAND HILL ROAD		Transaction ID: SA.34	
City State Zip Code PALO ALTO CA 94304	Amount of Each Receipt this Period 25700.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 25700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	40700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DEEDEE MCMURTRY

Mailing Address 620 SAND HILL ROAD

City PALO ALTO State CA Zip Code 94304

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.35

Amount of Each Receipt this Period
30700.00

B. Full Name (Last, First, Middle Initial)
CALVERT SAUNDERS MOORE

Mailing Address 812 PARK AVE. #11D

City NEW YORK State NY Zip Code 10021

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.37

Amount of Each Receipt this Period
9700.00

C. Full Name (Last, First, Middle Initial)
MR. GEORGE BRANIFF MOORE

Mailing Address 812 PARK AVE. #11D

City NEW YORK State NY Zip Code 10021

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

Name of Employer Occupation
Johnson, Johnson & Moore Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.36

Amount of Each Receipt this Period
7600.00

SUBTOTAL of Receipts This Page (optional)	▶	48000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ROBERT MUMMA, II

Mailing Address 6880 SE HARBOR CIRCLE

City State Zip Code
STUART FL 34996

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

Name of Employer Kimbob, Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.38

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT MUMMA, II

Mailing Address 6880 SE HARBOR CIRCLE

City State Zip Code
STUART FL 34996

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

Name of Employer Kimbob, Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.39

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
MS. KRISANN PEARCE

Mailing Address 633 S. 21ST STREET

City State Zip Code
ARLINGTON VA 22202

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

Name of Employer Akin Gump Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.40

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	20400.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. KATHERINE PHILLIPS

Mailing Address 24 VALLEYFIELDS FARM

City State Zip Code
HIGH POINT NC 27265

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA.41

Amount of Each Receipt this Period
10800.00

B. Full Name (Last, First, Middle Initial)
MR. S. DAVIS PHILLIPS

Mailing Address 24 VALLEYFIELDS FARM

City State Zip Code
HIGH POINT NC 27265

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA.42

Amount of Each Receipt this Period
10800.00

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY J. RENZI

Mailing Address 11504 LAKE POTOMAC DRIVE

City State Zip Code
POTOMAC MD 20854

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.43

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	22600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL G. ROSSETTI

Mailing Address 3113 VALLEY LANE

City State Zip Code
FALLS CHURCH VA 22044

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.44

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. MARIA E. ROTHSTEIN

Mailing Address 8152 PINEHURST HARBOUR WAY

City State Zip Code
PASADENA MD 21122

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

Name of Employer Occupation
Davco Restaurants Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
18000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.45

Amount of Each Receipt this Period
18000.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT W. SCHNEEBECK

Mailing Address 741 NORTH MANASOTA KEY RD

City State Zip Code
ENGLEWOOD FL 34223

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

Name of Employer Occupation
Strategic Program Management Insurance Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.47

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional)	33500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. GLORIA S. SCOLESE

Mailing Address 4647 MAIN STREET

City State Zip Code
SNYDER NY 14226

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.48

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. PAUL G. SCOLESE

Mailing Address 4647 MAIN STREET

City State Zip Code
SNYDER NY 14226

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

Name of Employer Occupation
Akin Gump Policy Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.49

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. A.J. SCRIBANTE

Mailing Address 7007 S. 109TH STREET

City State Zip Code
OMAHA NE 68128

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

Name of Employer Occupation
Vital Learning Center Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.50

Amount of Each Receipt this Period
9000.00

SUBTOTAL of Receipts This Page (optional)	9750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. LINDA HARE SCRIBANTE

Mailing Address 7007 S. 109TH STREET

City OMAHA State NE Zip Code 68128

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.51

Amount of Each Receipt this Period
9000.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD L. SHARP

Mailing Address 501 RIVERGATE DRIVE

City RICHMOND State VA Zip Code 23238

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

Name of Employer Occupation
Carmax Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.52

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
MRS. SHERRY SHARP

Mailing Address 501 RIVERGATE DRIVE

City RICHMOND State VA Zip Code 23238

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.53

Amount of Each Receipt this Period
13000.00

SUBTOTAL of Receipts This Page (optional)	▶	25000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. MARK S. SIEGEL

Mailing Address 1801 CENTURY PARK EAST

City State Zip Code
LOS ANGELES CA 90067

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

Name of Employer Occupation
Remy Investors President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: SA.54

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
MR. BARNEY J. SKLADANY, JR.

Mailing Address 1333 NEW HAMPSHIRE AVE NW

City State Zip Code
WASHINGTON DC 20036

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.55

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. BERT L. STEELE, III

Mailing Address 957 POWHATAN ST.

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation
Akin Gump Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.56

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	11250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. TOMMY G. THOMPSON

Mailing Address 3101 N. HAMPTON DRIVE

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
Akin Gump Partner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.57

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY J. TRANKINA

Mailing Address 110 NATURE MILL COURT

City State Zip Code
ALPHARETTA GA 30022

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

Name of Employer Occupation
Peachtree Settlement Fund- ing President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.58

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
MR. ARTHUR I. TSAMIS

Mailing Address 8202 GREENTREE MANOR LN

City State Zip Code
FAIRFAX STATION VA 22039

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

Name of Employer Occupation
S.F.C. Financial Investments

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 35000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.59

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional)	▶	20500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. JAMES ROMNEY TUCKER, JR.

Mailing Address 6607 CHESTERFIELD AVE

City State Zip Code
MCLEAN VA 22101

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

Name of Employer Occupation
Akin Gump Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA.60

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. BELINDA VANDERSLOOT

Mailing Address P.O. BOX 50305

City State Zip Code
IDAHO FALLS ID 83405

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA.64

Amount of Each Receipt this Period
25000.00

C. Full Name (Last, First, Middle Initial)
MR. FRANK L. VANDERSLOOT

Mailing Address P.O. BOX 50305

City State Zip Code
IDAHO FALLS ID 83405

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

Name of Employer Occupation
Melaleuca, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA.63

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional)	▶	50500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MRS. ALICE L. WALTON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 308 NE C STREET		Transaction ID: SA.67
City State Zip Code BENTONVILLE AR 72712	Amount of Each Receipt this Period 23000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 23000.00	

Full Name (Last, First, Middle Initial) B. MR. JIM WALTON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 308 NE C STREET		Transaction ID: SA.65
City State Zip Code BENTONVILLE AR 72712	Amount of Each Receipt this Period 20000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Arvest Bank Group CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) C. MRS. LYNNE WALTON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 308 NE C STREET		Transaction ID: SA.68
City State Zip Code BENTONVILLE AR 72712	Amount of Each Receipt this Period 25000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Corner Bookstore Owner - Retailer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional) ▶	68000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. S. ROBSON WALTON

Mailing Address 308 NE C STREET

City State Zip Code
BENTONVILLE AR 72712

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

Name of Employer Occupation
Walmart, Inc. Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.66

Amount of Each Receipt this Period
20000.00

B. Full Name (Last, First, Middle Initial)
DR. ALDONA Z. WOS, MD

Mailing Address 803 COUNTRY CLUB DRIVE

City State Zip Code
GREENSBORO NC 27408

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
38600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.69

Amount of Each Receipt this Period
38600.00

C. Full Name (Last, First, Middle Initial)
MRS. ELAINE WYNN

Mailing Address 3131 LAS VEGAS BLVD. SOUTH

City State Zip Code
LAS VEGAS NV 89109

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
29300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA.71

Amount of Each Receipt this Period
29300.00

SUBTOTAL of Receipts This Page (optional)	87900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. STEPHEN A. WYNN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 3131 LAS VEGAS BLVD. SOUTH		Transaction ID: SA.72	
City LAS VEGAS	State NV	Zip Code 89109	Amount of Each Receipt this Period 29300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Wynn Resorts	Occupation Chairman & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29300.00		

Full Name (Last, First, Middle Initial) B. MRS. DIANE J. YARBROUGH		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 9312 N PICTURE RIDGE ROAD		Transaction ID: SA.74	
City PEORIA	State IL	Zip Code 61615	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		
REFUND ISSUED			

Full Name (Last, First, Middle Initial) C. MR. WILLIAM M. YARBROUGH		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 9312 N PICTURE RIDGE ROAD		Transaction ID: SA.73	
City PEORIA	State IL	Zip Code 61615	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Zamfel Industries	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00		
REFUND ISSUED			

SUBTOTAL of Receipts This Page (optional) ▶	79300.00
TOTAL This Period (last page this line number only) ▶	835600.00

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

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

FOR LINE NUMBER: PAGE 28 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
BNSF RAILPAC

Mailing Address 700 13TH STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.3

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
BRISTOL-MYERS SQUIBB COMPANY PAC

Mailing Address 345 PARK AVE.

City State Zip Code
NEW YORK NY 10154

FEC ID number of contributing federal political committee. **C** C00035675

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 6

Transaction ID: SA.4

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT A CAR COMPANY PAC

Mailing Address 600 CORPORATE PARK DRIVE

City State Zip Code
SAIN LOUIS MO 63105

FEC ID number of contributing federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: SA.15

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **30000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 42
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVE NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 37000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: SA.21

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
SALLIE MAE, INC.

Mailing Address 12061 BLUEMONT WAY

City State Zip Code
RESTON VA 20190

FEC ID number of contributing federal political committee. **C** C00331835

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA.46

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
U.S. SENATE ADVISORY COMMITTEE

Mailing Address 13333 CULVER DRIVE

City State Zip Code
IRVINE CA 92604

FEC ID number of contributing federal political committee. **C** C00418996

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA.61

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional)	▶	27000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 42
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
UBS AMERICAS FUND FOR A BETTER GOVERNMENT

Mailing Address 1285 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10019

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: SA.62

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
WYETH GOOD GOVERNMENT FUND

Mailing Address FIVE GIRALDA FARMS

City State Zip Code
MADISON NJ 07940

FEC ID number of contributing federal political committee. **C** C00115303

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA.70

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	72000.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MR. GEOFF VERHOFF		Transaction ID: SB.11 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address 5842 N. 20TH ST.		Amount of Each Disbursement this Period 44374.02
City ARLINGTON State VA Zip Code 22205	000 Category/ Type	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. MR. GEOFF VERHOFF		Transaction ID: SB.2 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 5842 N. 20TH ST.		Amount of Each Disbursement this Period 11841.05
City ARLINGTON State VA Zip Code 22205	000 Category/ Type	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. MS. KATE WALTERS		Transaction ID: SB.8 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 5334 SCHUMACHER		Amount of Each Disbursement this Period 1250.00
City HOUSTON State TX Zip Code 77056	000 Category/ Type	
Purpose of Disbursement FUNDRAISING CONSULTING 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) ▶	57465.07
TOTAL 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 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. AMEX		Transaction ID: SB.3 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 1490.00	
City PHOENIX State AZ Zip Code 85072	Purpose of Disbursement MERCHANT FEE Candidate Name	000 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BB&T		Transaction ID: SB.10 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 1909 K ST., NW		Amount of Each Disbursement this Period 340.27	
City WASHINGTON State DC Zip Code 20006	Purpose of Disbursement MERCHANT FEE Candidate Name	000 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CAPITAL CAMPAIGNS		Transaction ID: SB.12 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 921 11TH ST., STE. 420		Amount of Each Disbursement this Period 4535.00	
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name	000 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) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	6365.27
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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. CAPITAL CAMPAIGNS

Mailing Address 921 11TH ST., STE. 420

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

000
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB.4

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

1250.00

B. CTA RESOURCES, LLC

Mailing Address 101 E. CARY ST.

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

000
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB.1

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2865.00

C. CTA RESOURCES, LLC

Mailing Address 101 E. CARY ST.

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

000
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB.7

Date of Disbursement

10 / 10 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

4615.00

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 34 / 42

<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)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
CTA RESOURCES, LLC

Mailing Address 101 E. CARY ST.

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

000
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB.9

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional)

800.00

TOTAL This Period (last page this line number only)

69245.34

**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 checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. BLASDEL FOR CONGRESS		Transaction ID: SB.26 Date of Disbursement 10 / 18 / 2006
Mailing Address 124 1/2 W. LINCOLN WAY, 2ND FL.		Amount of Each Disbursement this Period 75642.47
City LISBON State OH Zip Code 44432	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: Oh District: 6	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CHRIS WAKIM FOR CONGRESS		Transaction ID: SB.30 Date of Disbursement 10 / 18 / 2006
Mailing Address ONE HAMILTON AVE.		Amount of Each Disbursement this Period 76553.95
City WHEELING State WV Zip Code 26003	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 1	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. COLORADANS FOR RICK O'DONNELL		Transaction ID: SB.29 Date of Disbursement 10 / 18 / 2006
Mailing Address 3994 YOUNGFIELD ST.		Amount of Each Disbursement this Period 92051.87
City WHEAT RIDGE State CO Zip Code 80033	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: Co District: 7	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	244248.29
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. FRIENDS OF BOB CORKER		Transaction ID: SB.15 Date of Disbursement 10 / 18 / 2006
Mailing Address 425 2ND ST., NE		Amount of Each Disbursement this Period 89652.03
City WASHINGTON State DC Zip Code 20002	000 Category/ Type	
Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. FRIENDS OF CLAY SHAW		Transaction ID: SB.17 Date of Disbursement 10 / 18 / 2006
Mailing Address 133 E. INDIANA AVE.		Amount of Each Disbursement this Period 103785.92
City DELAND State FL Zip Code 32724	000 Category/ Type	
Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. FRIENDS OF MIKE SODREL		Transaction ID: SB.18 Date of Disbursement 10 / 18 / 2006
Mailing Address 702 NORTH SHORE DR., #500		Amount of Each Disbursement this Period 93826.92
City JEFFERSONVILLE State IN Zip Code 47130	000 Category/ Type	
Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: In District: 6		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	287264.87
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. GARD FOR CONGRESS		Transaction ID: SB.31 Date of Disbursement																					
Mailing Address 2701 EXECUTIVE DR.		<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>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	1	0		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	8		2	0	0	6														
City GREEN BAY	State WI	Zip Code 54304	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRANSFER OF NET PROCEEDS		000	95649.86																				
Candidate Name		Category/ Type																					
Office Sought: <input checked="" 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: WI District: 8																							

Full Name (Last, First, Middle Initial) B. GEOFF DAVIS FOR CONGRESS		Transaction ID: SB.19 Date of Disbursement																					
Mailing Address 3161 DIXIE HIGHWAY, STE. F		<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>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	1	0		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	8		2	0	0	6														
City ERLANGER	State KY	Zip Code 41018	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRANSFER OF NET PROCEEDS		000	90636.67																				
Candidate Name		Category/ Type																					
Office Sought: <input checked="" 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: KY District: 4																							

Full Name (Last, First, Middle Initial) C. HEATHER WILSON FOR CONGRESS		Transaction ID: SB.20 Date of Disbursement																					
Mailing Address 6001 SAN MATEO NE STE. B1		<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>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	1	0		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	8		2	0	0	6														
City ALBUQUERQUE	State NM	Zip Code 87109	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRANSFER OF NET PROCEEDS		000	94217.58																				
Candidate Name		Category/ Type																					
Office Sought: <input checked="" 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: NM District: 1																							

SUBTOTAL of Disbursements This Page (optional)	▶	280504.11
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)

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<input type="checkbox"/> 21b	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. IA 01 CONGRESSIONAL VICTORY CMTE		Transaction ID: SB.22 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 310 1ST ST., SE		Amount of Each Disbursement this Period 86534.92
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 1	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JIM GERLACH FOR CONGRESS		Transaction ID: SB.32 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1230 POTTSTOWN PIKE STE. 4		Amount of Each Disbursement this Period 98957.72
City GLENMOORE State PA Zip Code 19343	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 6	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. MARTHA RAINVILLE FOR CONGRESS		Transaction ID: SB.27 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 500 INTERSTATE CORP. CENTER		Amount of Each Disbursement this Period 76756.52
City WILLISTON State VT Zip Code 05495	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 1	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	262249.16
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. MIKE DEWINE FOR US SENATE		Transaction ID: SB.14 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 250 E. BROAD, STE. 1600		Amount of Each Disbursement this Period 88731.97
City COLUMBUS State OH Zip Code 43125	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: Oh District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MN 06 CONGRESSIONAL VICTORY CMTE		Transaction ID: SB.23 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 310 1ST ST., SE		Amount of Each Disbursement this Period 89725.17
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 6	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. NY 24 CONGRESSIONAL VICTORY CMTE		Transaction ID: SB.24 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 310 1ST ST., SE		Amount of Each Disbursement this Period 95584.80
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement TRANSFER OF NET PROCEEDS Candidate Name Category/Type 000	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	274041.94
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)

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<input type="checkbox"/> 21b	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial) A. RALPH NORMAN FOR CONGRESS		Transaction ID: SB.25 Date of Disbursement
Mailing Address 2685 CELANESE RD., STE. 123		<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City ROCK HILL	State SC	Zip Code 29732
Purpose of Disbursement TRANSFER OF NET PROCEEDS		<input type="text" value="000"/> Category/ Type
Candidate Name		
Office Sought: <input checked="" 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: SC	District: 6	
		Amount of Each Disbursement this Period <input type="text" value="81065.90"/>

Full Name (Last, First, Middle Initial) B. ROSKAM FOR CONGRESS		Transaction ID: SB.28 Date of Disbursement
Mailing Address 423 W. WESLEY		<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WHEATON	State IL	Zip Code 60187
Purpose of Disbursement TRANSFER OF NET PROCEEDS		<input type="text" value="000"/> Category/ Type
Candidate Name		
Office Sought: <input checked="" 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: IL	District: 6	
		Amount of Each Disbursement this Period <input type="text" value="90636.63"/>

Full Name (Last, First, Middle Initial) C. SIMMONS FOR CONGRESS		Transaction ID: SB.16 Date of Disbursement
Mailing Address 12 ROOSEVELT AVE.		<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MYSTIC	State CT	Zip Code 06355
Purpose of Disbursement TRANSFER OF NET PROCEEDS		<input type="text" value="000"/> Category/ Type
Candidate Name		
Office Sought: <input checked="" 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: CT	District: 2	
		Amount of Each Disbursement this Period <input type="text" value="106522.82"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="278225.35"/>
TOTAL 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)

<input type="checkbox"/> 21b	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEVE CHABOT FOR CONGRESS

Mailing Address 3141 HARRISON AVE.

City CINCINNATI State OH Zip Code 45211

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name

000
Category/
Type

Office Sought: House
 Senate
 President
State: Oh District: 1

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB.21
Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

106587.95

B. Full Name (Last, First, Middle Initial)
TALENT FOR SENATE

Mailing Address 147 N. MERAMEC STE. 100

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement
TRANSFER OF NET PROCEEDS

Candidate Name

000
Category/
Type

Office Sought: House
 Senate
 President
State: MO District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB.13
Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

88284.77

SUBTOTAL of Disbursements This Page (optional)

194872.72

TOTAL This Period (last page this line number only)

1821406.44

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
2006 JOINT CANDIDATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. DIANE YARBROUGH

Mailing Address 9312 N. PICTURE RIDGE ROAD

City PEORIA State IL Zip Code 61615

Purpose of Disbursement REFUND
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB.6
Date of Disbursement
10 / 10 / 2006

Amount of Each Disbursement this Period
10000.00

000
Category/Type

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM YARBROUGH

Mailing Address 9312 N. PICTURE RIDGE ROAD

City PEORIA State IL Zip Code 61615

Purpose of Disbursement REFUND
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB.5
Date of Disbursement
10 / 10 / 2006

Amount of Each Disbursement this Period
10000.00

000
Category/Type

SUBTOTAL of Disbursements This Page (optional)	20000.00
TOTAL This Period (last page this line number only)	20000.00