

**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

CARE POLITICAL ACTION COMMITTEE (CARE PAC)

ADDRESS (number and street)

Z28 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIPCODE

C00389668

3. IS THIS REPORT

X

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)

X

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 (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

08

01

2005

through

08

31

2005

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

09

16

2005

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Report Covering the Period: From: ^M08 ^D01 ^Y2005 To: ^M08 ^D31 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		268776.29
(b) Cash on Hand at Beginning of Reporting Period	174375.28	
(c) Total Receipts (from Line 19)	54500.00	114398.32
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	228875.28	383174.61
7. Total Disbursements (from Line 31)	17910.99	172210.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	210964.29	210964.29
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Report Covering the Period: From: ^M08 ^D01 ^Y2005 To: ^M08 ^D31 ^Y2005

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		
(i) Itemized (use Schedule A)	50500.00	80275.00
(ii) Unitemized	0.00	1310.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	50500.00	81585.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	4000.00	32477.84
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	54500.00	114062.84
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	335.48
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))	54500.00	114398.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	54500.00	114398.32

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.....	7485.99	105650.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7485.99	105650.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	44000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	10425.00	22560.00
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 ActMty (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))..	17910.99	172210.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	17910.99	172210.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	54500.00	114062.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54500.00	114062.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7485.99	105650.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	335.48
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7485.99	105314.84

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

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

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

11a 11b 11c 12
13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. Byron R. Adams, Jr.		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address 165 Olive Hill Lane		Transaction ID: SA11A1.7994
City Woodside	State CA	Zip Code 94062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Rosewood Capital	Occupation Investor	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Gerson Baker		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address 201 Filbert St., Ste. 700		Transaction ID: SA11A1.7992
City San Francisco	State CA	Zip Code 94133
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self	Occupation Investor	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Michael J. Beer		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address 13368 Colchester Fairy Place		Transaction ID: SA11A1.7980
City Woodbridge	State VA	Zip Code 22191
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Williams & Jensen	Occupation Government Affairs	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	10500.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 7 / 15

(check only one)

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. Dan Fisher		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address Two Folsom St.		Transaction ID: SA11A1.7985
City	State	Zip Code
San Francisco	CA	94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Gap, Inc.	Occupation Chairman of the Board	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Dan Fisher		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address One Maritime Plz., Ste. 1400		Transaction ID: SA11A1.7986
City	State	Zip Code
San Francisco	CA	94111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Homemaker	Occupation Homemaker	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Elizabeth Fisher		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address One Maritime Plz., Ste. 1400		Transaction ID: SA11A1.7990
City	State	Zip Code
San Francisco	CA	94111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Homemaker	Occupation Homemaker	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. John J. Fisher		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address One Maritime Plz., Ste. 1400		Transaction ID: SA11A1.7987
City San Francisco	State CA	Zip Code 94111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Pisces, Inc.	Occupation President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Laura Fisher		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address One Maritime Plz., Ste. 1400		Transaction ID: SA11A1.7988
City San Francisco	State CA	Zip Code 94111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Homemaker	Occupation Homemaker	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Robert J. Fisher		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address One Maritime Plz., Ste. 1400		Transaction ID: SA11A1.7989
City San Francisco	State CA	Zip Code 94111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Pisces, Inc.	Occupation Businessman	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
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 9 / 15

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. William S. Fisher		Date of Receipt M / D / Y 08 / 03 / 2005	
Mailing Address One Triple C Ranch Rd.		Transaction ID: SA11A1.7991	
City San Anselmo	State CA	Zip Code 94060	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Plscas, Inc.	Occupation Chairman	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00
Full Name (Last, First, Middle Initial) B. Reed Hastings		Date of Receipt M / D / Y 08 / 03 / 2005	
Mailing Address 804 Lighthouse Ave.		Transaction ID: SA11A1.7993	
City Santa Cruz	State CA	Zip Code 95060	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Netflix, Inc.	Occupation CEO	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	50500.00

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

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

FOR LINE NUMBER: PAGE 10 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 08 / 24 / 2005
Mailing Address 100 Abbott Park Rd. D312 AP6D		Transaction ID: SA11C.8011
City Abbott Park	State IL	Zip Code 60064
FEC ID number of contributing federal political committee. C C00040279		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. PFIZER INC. PAC		Date of Receipt M / D / Y 08 / 24 / 2005
Mailing Address 235 East 42nd Street		Transaction ID: SA11C.8009
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C CD0016683		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION COMMITTEE (GLAXOSMITHKLINE PAC)		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address Five Moore Drive P.O. Box 13358		Transaction ID: SA11C.7983
City Res. Triangle Park	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C CD0199703		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
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 11 / 15

(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)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION COMMITTEE (GLAXOSMITHKLINE PAC)		Date of Receipt M / D / Y 08 / 24 / 2005
Mailing Address Five Moore Drive P.O. Box 13358		Transaction ID: SA11C.8008
City Res. Triangle Park	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C C00199703		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	4000.00

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. e2c Consulting		Transaction ID: SB21B.7978 Date of Disbursement 08 / 02 / 2005	
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20017	Purpose of Disbursement PAC Fundraising Consulting	Category/Type 003	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. e2c Consulting		Transaction ID: SB21B.8003 Date of Disbursement 08 / 18 / 2005	
Mailing Address PO Box 29576		Amount of Each Disbursement this Period 565.82	
City Washington State DC Zip Code 20017	Purpose of Disbursement PAC Event Catering	Category/Type 003	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Huckaby Davis Lisker		Transaction ID: SB21B.7996 Date of Disbursement 08 / 08 / 2005	
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 280.50	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Accounting/Compliance Services	Category/Type 001	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶ **5846.32**

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

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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial)
A. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
PAC Call Phone

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Transaction ID: SB21B.7979
Date of Disbursement
08 / 02 / 2005

Amount of Each Disbursement this Period
74.69

Full Name (Last, First, Middle Initial)
B. Wiley, Rein & Fielding

Mailing Address 1776 K St, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Transaction ID: SB21B.7988
Date of Disbursement
08 / 17 / 2005

Amount of Each Disbursement this Period
1501.35

SUBTOTAL of Disbursements This Page (optional)	▶	1576.04
TOTAL This Period (last page this line number only)	▶	7422.36

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial) A. Canton Salvation Army		Transaction ID: SB29.7975 Date of Disbursement 08 / 02 / 2005	
Mailing Address 420 Market Ave.		Amount of Each Disbursement this Period 10000.00	
City Canton State OH Zip Code 44714	Purpose of Disbursement Charitable Contribution	012 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Chairedible		Transaction ID: SB29.7999 Date of Disbursement 08 / 17 / 2005	
Mailing Address 5620 Carters Grove, NW		Amount of Each Disbursement this Period 300.00	
City Massillon State OH Zip Code 44646	Purpose of Disbursement Charitable Contribution	012 Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Committee to Elect Calvert		Transaction ID: SB29.8001 Date of Disbursement 08 / 17 / 2005	
Mailing Address 4487 Grand Teton Dr.		Amount of Each Disbursement this Period 100.00	
City Medina State OH Zip Code 44258	Purpose of Disbursement Nonfederal Contribution	011 Category/ Type	
Office Sought: House Senate President State: OH District	Disbursement For: 2006 X Primary General Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ► **10400.00**

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 15 / 15

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

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NAME OF COMMITTEE (In Full)
CARE POLITICAL ACTION COMMITTEE (CARE PAC)

Full Name (Last, First, Middle Initial)
A. Committee to Elect Nancy Halter

Transaction ID: SB29.8004
Date of Disbursement

Mailing Address 417 26th St., NW

08 / 23 / 2005

City State Zip Code
Massillon OH 44647

Amount of Each Disbursement this Period

Purpose of Disbursement
Nonfederal Contribution

25.00

Candidate Name

011
Category/
Type

Office Sought: House Disbursement For: 2006
Senate X Primary General
President Other (specify) ▼

State: District

SUBTOTAL of Disbursements This Page (optional) ▶

25.00

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

10425.00