

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NEW PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		37294.75
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	100549.02									
(c) Total Receipts (from Line 19)	29000.00	140500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	129549.02	177794.75								
7. Total Disbursements (from Line 31)	56895.39	105141.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	72653.63	72653.63								
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
NEW PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	18000.00	77500.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	18000.00	77500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	11000.00	63000.00
(c) Other Political Committees (such as PACs)	29000.00	140500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	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))	29000.00	140500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29000.00	140500.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10395.39	28141.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	10395.39	28141.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46500.00	77000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	56895.39	105141.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56895.39	105141.12

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	29000.00	140500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29000.00	140500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10395.39	28141.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10395.39	28141.12

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

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

FOR LINE NUMBER: PAGE 6 / 27
(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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ALVES & SON DAIRY
Mailing Address 8407 MITCHELL RD
City CERES State CA Zip Code 95307
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 12 / 26 / 2007
Transaction ID: SA11AI.5857
Amount of Each Receipt this Period 1000.00
PARTNER

B. Full Name (Last, First, Middle Initial)
JOE ALVES
Mailing Address P.O. BOX 12
City TURLOCK State CA Zip Code 95380
FEC ID number of contributing federal political committee. **C**
Name of Employer ALVES & SON DAIRY Occupation FARMER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 12 / 26 / 2007
Transaction ID: SA11AI.5857.0
Amount of Each Receipt this Period 1000.00
PARTNER
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JOE AZEVEDO
Mailing Address 11255 STATE HWY 33
City GUSTINE State CA Zip Code 95322
FEC ID number of contributing federal political committee. **C**
Name of Employer AZEVEDO DAIRY Occupation DAIRY OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 12 / 18 / 2007
Transaction ID: SA11AI.5863
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 7 / 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
CORREIA FAMILY DAIRY

Mailing Address 26380 W FAHEY RD

City State Zip Code
GUSTINE CA 95322

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

Name of Employer Occupation

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 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.5853

Amount of Each Receipt this Period
1000.00

PARTNERSHIP

B. Full Name (Last, First, Middle Initial)
FRANK CORREIA

Mailing Address 26380 W FAHEY RD

City State Zip Code
GUSTINE CA 95322

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

Name of Employer Occupation
CORREIA FAMILY DAIRY FARMER

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 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.5853.0

Amount of Each Receipt this Period
1000.00

PARTNER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
DORES DAIRY

Mailing Address 22846 W SECOND AVE

City State Zip Code
STEVINSON CA 95374

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5851

Amount of Each Receipt this Period
2000.00

PARTNERSHIP

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 27
	<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) JOHN DORES	Date of Receipt MM / DD / YYYY 12 / 20 / 2007
	Mailing Address 22846 W SECOND AVE	Transaction ID: SA11AI.5851.0
	City State Zip Code STEVINSON CA 95374	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	PARTNER
	Name of Employer Occupation DORES DAIRY FARMER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) JOSE V SILVEIRA DAIRY	Date of Receipt MM / DD / YYYY 12 / 26 / 2007
	Mailing Address 10662 NEWSOM ROAD	Transaction ID: SA11AI.5859
	City State Zip Code GUSTINE CA 95322	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	PARTNERSHIP
	Name of Employer Occupation DAIRY FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) JOSE V SILVEIRA	Date of Receipt MM / DD / YYYY 12 / 26 / 2007
	Mailing Address 10662 NEWSOM ROAD	Transaction ID: SA11AI.5859.0
	City State Zip Code GUSTINE CA 95322	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	PARTNER
	Name of Employer Occupation JOSE V SILVEIRA DAIRY SELF EMPLOYED - DAIRYFARMER	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 27
	<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) MING BIN KOU		Date of Receipt	
	Mailing Address 1912 E VERNON AVE		M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.5834
	VERNON	CA	90058	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		5000.00	
Name of Employer RED CHAMBER SEAFOOD		Occupation CHAIRMAN-PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

B.	Full Name (Last, First, Middle Initial) RICHARD V MARTIN		Date of Receipt	
	Mailing Address 15926 LA LINDURA		M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.5833
	WHITTIER	CA	90603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		5000.00	
Name of Employer RED CHAMBER SEAFOOD		Occupation VICE-PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

C.	Full Name (Last, First, Middle Initial) SILVEIRA BROS DAIRY		Date of Receipt	
	Mailing Address 10652 NEWSOM RD		M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.5855
	GUSTINE	CA	95322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		2000.00	
Name of Employer		Occupation PARTNERSHIP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 27
	(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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) EDDIE SILVEIRA		Date of Receipt
	Mailing Address 10652 NEWSOM RD		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	GUSTINE	CA	95322
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer SILVEIRA BROS DAIRY	Occupation FARMER	Transaction ID: SA11AI.5855.0
Amount of Each Receipt this Period		<input type="text" value="2000.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		PARTNER	
Aggregate Year-to-Date ▼		<input type="text" value="2000.00"/>	
			[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="18000.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 27
(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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
MM / DD / YYYY
11 / 27 / 2007

Transaction ID: SA11C.5830

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DAIRY FARMERS OF AMERICA INC DEPAC (DAIRY EDUCATION POLITICAL ACTION COMMITTEE)

Mailing Address P O BOX 909700

City KANSAS CITY State MO Zip Code 64190

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11C.5831

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Ave.
Room 1109

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2007

Transaction ID: SA11C.5828

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 6000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 27	
	(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"/> 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) NEW PAC
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A.	Full Name (Last, First, Middle Initial) R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.	Date of Receipt
	Mailing Address P. O. Box 718	<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City State Zip Code Winston-Salem NC 27102	Transaction ID: SA11C.5827
	FEC ID number of contributing federal political committee. <input type="text" value="C00042002"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="11000.00"/>

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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
BANK OF AMERICA - CREDIT CARD

Mailing Address P.O. BOX 15715

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5767

Date of Disbursement

07 / 11 / 2007

Amount of Each Disbursement this Period

60.00

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA - CREDIT CARD

Mailing Address P.O. BOX 15715

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5772

Date of Disbursement

08 / 17 / 2007

Amount of Each Disbursement this Period

3669.36

C. Full Name (Last, First, Middle Initial)
CHASE CARD SERVICE

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING COSTS

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5768

Date of Disbursement

08 / 17 / 2007

Amount of Each Disbursement this Period

1239.92

SUBTOTAL of Disbursements This Page (optional) ▶

4969.28

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)
NEW PAC

A. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB Mailing Address 300 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAC FUNDRAISING EXP: CATERING COSTS Candidate Name	Transaction ID: SB21B.5768.0 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 917.83 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) BUCA DI BEPPO Mailing Address 1825 CONNECTICUT AVE., NW City WASHINGTON State DC Zip Code 20009 Purpose of Disbursement PAC FUNDRAISING EXP: CATERING COSTS Candidate Name	Transaction ID: SB21B.5768.1 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 322.09 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) CHASE CARD SERVICE Mailing Address P.O. BOX 94014 City PALANTINE State IL Zip Code 60094 Purpose of Disbursement TRAVEL Candidate Name	Transaction ID: SB21B.5771 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 639.90

SUBTOTAL of Disbursements This Page (optional)	▶	639.90
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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) CHASE CARD SERVICE <hr/> Mailing Address P.O. BOX 94014 <hr/> City PALANTINE State IL Zip Code 60094 <hr/> Purpose of Disbursement PAC FUNRAISING EXP: CATERING COSTS Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5773 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2007 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">779.33</div>
B.	Full Name (Last, First, Middle Initial) CHASE CARD SERVICE <hr/> Mailing Address P.O. BOX 94014 <hr/> City PALANTINE State IL Zip Code 60094 <hr/> Purpose of Disbursement TRAVEL Candidate Name 002 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5774 Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2007 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">380.95</div>
C.	Full Name (Last, First, Middle Initial) CHASE CARD SERVICE <hr/> Mailing Address P.O. BOX 94014 <hr/> City PALANTINE State IL Zip Code 60094 <hr/> Purpose of Disbursement PAC FUNDRAISING EXP: CATERING COSTS Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5775 Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2007 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">672.07</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; display: inline-block;">1832.35</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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)
NEW PAC

<p>A. Full Name (Last, First, Middle Initial) CHASE CARD SERVICE</p> <p>Mailing Address P.O. BOX 94014</p> <p>City PALANTINE State IL Zip Code 60094</p> <p>Purpose of Disbursement TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.5776</p> <p>Date of Disbursement 10 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 816.75</p> <p>002 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) CHASE CARD SERVICE</p> <p>Mailing Address P.O. BOX 94014</p> <p>City PALANTINE State IL Zip Code 60094</p> <p>Purpose of Disbursement PAC FUNDRAISING EXP: CATERING COSTS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.5777</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 928.11</p> <p>003 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON</p> <p>Mailing Address 2340 S TERRACE ST</p> <p>City VISALIA State CA Zip Code 93277</p> <p>Purpose of Disbursement CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.5778</p> <p>Date of Disbursement 07 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1944.86

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 17 / 27

<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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.5779

Date of Disbursement

Mailing Address 2340 S TERRACE ST

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	7

City VISALIA State CA Zip Code 93277

Amount of Each Disbursement this Period

Purpose of Disbursement
CONSULTING

001
Category/ Type

200.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.5780

Date of Disbursement

Mailing Address 2340 S TERRACE ST

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	7

City VISALIA State CA Zip Code 93277

Amount of Each Disbursement this Period

Purpose of Disbursement
CONSULTING

001
Category/ Type

200.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Transaction ID: SB21B.5781

Date of Disbursement

Mailing Address 2340 S TERRACE ST

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	0	7

City VISALIA State CA Zip Code 93277

Amount of Each Disbursement this Period

Purpose of Disbursement
CONSULTING

001
Category/ Type

200.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ►

600.00

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

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**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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address 2340 S TERRACE ST

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
CONSULTING

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5782
Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address 2340 S TERRACE ST

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
CONSULTING

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5850
Date of Disbursement

12 / 09 / 2007

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) ►

400.00

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

10386.39

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A. CHARLIE DENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHARLIE DENT FOR CONGRESS

Transaction ID: SB23.5839

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	7

Mailing Address PO Box 442

Amount of Each Disbursement this Period

2000.00

City Allentown State PA Zip Code 18105

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
CHARLES W DENT

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 15

B. CHRISTOPHER SHAYS FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

CHRISTOPHER SHAYS FOR CONGRESS COMMITTEE

Transaction ID: SB23.5845

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	7

Mailing Address 98 East Avenue Rear Building
98 East Avenue Rear Building

Amount of Each Disbursement this Period

2000.00

City Norwalk State CT Zip Code 06851

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
CHRISTOPHER SHAYS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CT District: 04

C. CITIZENS FOR ANDAL

Full Name (Last, First, Middle Initial)

CITIZENS FOR ANDAL

Transaction ID: SB23.5789

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

Mailing Address POST OFFICE BOX 1607

Amount of Each Disbursement this Period

2500.00

City STOCKTON State CA Zip Code 95201

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
DEAN F ANDAL

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 11

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

<p>A. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DAVID CAPIELLO FOR CONGRESS</p> <p>Mailing Address PO BOX 3198</p> <p>City DANBURY State CT Zip Code 06813</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name DAVID JOHN CAPIELLO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5799</p> <p>Date of Disbursement 10 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF MIKE FERGUSON</p> <p>Mailing Address c/o Ron Gravino P.O. Box 225</p> <p>City Colonia State NJ Zip Code 07067</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name MIKE FERGUSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5844</p> <p>Date of Disbursement 07 / 25 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF MIKE SODREL</p> <p>Mailing Address 702 North Shore Drive Suite 500</p> <p>City Jeffersonville State IN Zip Code 47130</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name MICHAEL E SODREL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5813</p> <p>Date of Disbursement 10 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.	Full Name (Last, First, Middle Initial) HELLER FOR CONGRESS	Transaction ID: SB23.5848 Date of Disbursement
	Mailing Address PO BOX 750580	<input type="text" value="07"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City LAS VEGAS State NV Zip Code 89136	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="2000.00"/>
	Candidate Name DEAN HELLER	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JEB BRADLEY FOR CONGRESS	Transaction ID: SB23.5811 Date of Disbursement
	Mailing Address 645 South Main Street	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Wolfeboro State NH Zip Code 03894	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name JOSEPH E MR III BRADLEY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JIM RYUN FOR CONGRESS	Transaction ID: SB23.5812 Date of Disbursement
	Mailing Address PO Box 826	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Topeka State KS Zip Code 66601	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name JIM R RYUN	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
JORDAN FOR CONGRESS

Transaction ID: SB23.5806
Date of Disbursement

Mailing Address PO Box 860580

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	7

City Shawnee Mission State KS Zip Code 66226

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
NICHOLAS M JORDAN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: KS District: 03

B.

Full Name (Last, First, Middle Initial)
KIRK FOR CONGRESS

Transaction ID: SB23.5836
Date of Disbursement

Mailing Address P.O. Box 8

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	7

City Winnetka State IL Zip Code 60093

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
MARK STEVEN KIRK

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
KUHLMAN FOR CONGRESS

Transaction ID: SB23.5841
Date of Disbursement

Mailing Address 10 GANESVOORT STREET
SUITE 101

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	7

City BATH State NY Zip Code 14810

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
JOHN KUHLMAN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 29

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

<p>A. Full Name (Last, First, Middle Initial) MUSGRAVE FOR CONGRESS</p> <p>Mailing Address 118 West Charlotte Street</p> <p>City Johnstown State CO Zip Code 80534</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name MARILYN N MUSGRAVE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5783</p> <p>Date of Disbursement 07 / 25 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) OH-5 CONGRESSIONAL VICTORY COMMITTEE</p> <p>Mailing Address PO BOX 40366</p> <p>City WASHINGTON State DC Zip Code 20016</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5814</p> <p>Date of Disbursement 10 / 25 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) PEOPLE WITH HART INC</p> <p>Mailing Address P.O. Box 435</p> <p>City Wexford State PA Zip Code 15090</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name MELISSA A HART</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5797</p> <p>Date of Disbursement 09 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
PEOPLE WITH HART INC

Transaction ID: SB23.5810
Date of Disbursement

Mailing Address P.O. Box 435

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	7

City Wexford State PA Zip Code 15090

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
MELISSA A HART

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 04

B.

Full Name (Last, First, Middle Initial)
ROB WITTMAN FOR CONGRESS

Transaction ID: SB23.5817
Date of Disbursement

Mailing Address PO BOX 999
PO BOX 999

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	7

City MONTROSS State VA Zip Code 22520

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
ROBERT J. WITTMAN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: VA District: 01

C.

Full Name (Last, First, Middle Initial)
RUDY GIULIANI PRESIDENTIAL COMMITTEE INC

Transaction ID: SB23.5821
Date of Disbursement

Mailing Address C/O JOHN GROSS
PROSKAUER ROSE LLP 1585 BROADWAY

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	7

City NEW YORK State NY Zip Code 10036

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
RUDOLPH W. GIULIANI

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District: 00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NEW PAC

A.	Full Name (Last, First, Middle Initial) SCHOCK FOR CONGRESS	Transaction ID: SB23.5790 Date of Disbursement
	Mailing Address PO BOX 10555	<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City PEORIA State IL Zip Code 61612	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="2000.00"/>
	Candidate Name AARON SCHOCK	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STEVE CHABOT FOR CONGRESS	Transaction ID: SB23.5824 Date of Disbursement
	Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.	<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>
	City Cincinnati State OH Zip Code 45211	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="2000.00"/>
	Candidate Name STEVE CHABOT	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THELMA DRAKE FOR CONGRESS	Transaction ID: SB23.5840 Date of Disbursement
	Mailing Address P.O. Box 61480	<input type="text" value="07"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City Virginia Beach State VA Zip Code 23466	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="2000.00"/>
	Candidate Name THELMA DRAKE	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A.	Full Name (Last, First, Middle Initial) TIM MURPHY FOR CONGRESS Mailing Address PO Box 24551 City Pttsburgh State PA Zip Code 15234 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name TIM MURPHY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5820 Date of Disbursement 12 / 12 / 2007 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) VERN BUCHANAN FOR CONGRESS Mailing Address P. O. Box 48928 City Sarasota State FL Zip Code 34230 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name VERNON BUCHANAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5835 Date of Disbursement 07 / 25 / 2007 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) WALSH FOR CONGRESS COMMITTEE Mailing Address 4969 HORIZON TERRACE City SYRACUSE State NY Zip Code 13215 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name JAMES T WALSH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5784 Date of Disbursement 07 / 25 / 2007 Amount of Each Disbursement this Period 2000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	46500.00