

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Leadership Encouraging Excellence PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; 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		168832.73
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	204234.56									
(c) Total Receipts (from Line 19)	45250.00	166650.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	249484.56	335482.73								
7. Total Disbursements (from Line 31)	36484.84	122483.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	212999.72	212999.72								
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
Leadership Encouraging Excellence PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11500.00	15400.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11500.00	15400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	33750.00	151250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	45250.00	166650.00
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))	45250.00	166650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45250.00	166650.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	11984.84	49483.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11984.84	49483.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	19500.00	63000.00
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.....	5000.00	10000.00
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))..	36484.84	122483.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	36484.84	122483.01

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)	45250.00	166650.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45250.00	166650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11984.84	49483.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11984.84	49483.01

**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 / 20
	<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	

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)
Leadership Encouraging Excellence PAC

A. American Health Care Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address Mr. Bruce Yarwood
1201 L Street, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

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
0 8 / 2 5 / 2 0 0 6

Transaction ID: 61005.C222

Amount of Each Receipt this Period
3000.00

Receipt

B. American Internatl Group Employee PAC

Full Name (Last, First, Middle Initial)
Mailing Address Leslie J. Kerman
6849 Old Dominion Drive, Ste. 222

City Mc Lean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C** C00097725

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 2 / 2 0 0 6

Transaction ID: 61005.C223

Amount of Each Receipt this Period
1250.00

In-Kind
catering for 8/2/06 PAC event

C. Angen PAC

Full Name (Last, First, Middle Initial)
Mailing Address Ms. Nicki Antorcho
1300 Eye Street, NW, Suite 270 Wes

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

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
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61005.C235

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	6250.00
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 7 / 20
	(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)
Leadership Encouraging Excellence PAC

A. Full Name (Last, First, Middle Initial)
Beverly Enterprises Inc. PAC

Mailing Address Mr. Jack MacDonald
1250 H Street, NW, Suite 555

City State Zip Code
Washington DC 20005-3965

FEC ID number of contributing federal political committee. **C** C00346346

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

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

Transaction ID: 61005.C224

Amount of Each Receipt this Period
4000.00

Receipt

B. Full Name (Last, First, Middle Initial)
College of American Pathologists PAC

Mailing Address Ms. Denise Bell
1350 Eye Street, NW, Suite 590

City State Zip Code
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

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
0	7	/	0	5	/	2	0	0	6

Transaction ID: 60711.C218

Amount of Each Receipt this Period
3000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Community Oncology Alliance PAC

Mailing Address 1770 Kirby Parkway Ste. 400

City State Zip Code
Germantown TN 38138

FEC ID number of contributing federal political committee. **C** C00383976

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

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

Transaction ID: 61005.C233

Amount of Each Receipt this Period
3500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	10500.00
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 8 / 20
	(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)
Leadership Encouraging Excellence PAC

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

Mailing Address Mr. J. Michael Keeling
1726 M Street, NW, Suite 501

City State Zip Code
Washington DC 20036-4507

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	5	/	2	0	0	6

Transaction ID: 60711.C219

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
International Paper PAC

Mailing Address Mr. John C. Runyan
1101 Pennsylvania Ave., NW, Suite

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: 61005.C232

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Novartis Corporation PAC

Mailing Address Mr. Dan Casserly
701 Pennsylvania Ave., NW, Suite 7

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	5	/	2	0	0	6

Transaction ID: 60711.C220

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	6500.00
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 / 20
	<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. OB-GYNS for Womens Health PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Government Affairs Director PO Box 23498		Transaction ID: 61005.C229
City Washington State DC Zip Code 20026-3498	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00364158		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) B. OB-GYNS for Womens Health PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Government Affairs Director PO Box 23498		Transaction ID: 61005.C228
City Washington State DC Zip Code 20026-3498	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00364158		Receipt
Name of Employer	Occupation	
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. St. Paul Travelers Companies, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address Ms. Ruth Ravitz Smith 1331 F Street, NW, Suite 975		Transaction ID: 61005.C230
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00376376		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 20
	(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)
Leadership Encouraging Excellence PAC

A. Full Name (Last, First, Middle Initial)
US Oncology Good Govt. Committee

Mailing Address Mr. Eric S. Berger
16825 Northchase Dr., Suite 1300

City State Zip Code
Houston TX 77060

FEC ID number of contributing federal political committee. **C** C00339655

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
0	9	/	2	9	/	2	0	0	6

Transaction ID: 61005.C234

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	33750.00

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 / 20
	<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)
Leadership Encouraging Excellence PAC

A. Full Name (Last, First, Middle Initial)
Edward Greissing

Mailing Address 1200 Hunters Grove Ct.

City	State	Zip Code
Mc Lean	VA	22102-2326

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

Name of Employer Sanofi Aventis	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
09 / 22 / 2006

Transaction ID: 61005.C225

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Clelia Walters

Mailing Address 1685 Hunting Creek Drive

City	State	Zip Code
Alexandria	VA	22314

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

Name of Employer Pharma	Occupation financial advisor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
09 / 28 / 2006

Transaction ID: 61005.C227

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Walters

Mailing Address 1685 Hunting Creek Dr.

City	State	Zip Code
Alexandria	VA	22314

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

Name of Employer Altha Inc.	Occupation CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
09 / 28 / 2006

Transaction ID: 61005.C226

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	11500.00
TOTAL This Period (last page this line number only)	▶	11500.00

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)

PAGE 12 / 20

<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. American Internatl Group Employee PAC		Transaction ID: 61005.C223IK Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Leslie J. Kerman 6849 Old Dominion Drive, Ste. 222		Amount of Each Disbursement this Period 1250.00
City Mc Lean	State VA	
Zip Code 22101-		IN KIND: CATERING FOR 8/2- /06 PAC EVENT
Purpose of Disbursement CATERING FOR 8/2/06 PAC EVENT		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Transaction ID: 61005.E205 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 255.00
City Washington	State DC	
Zip Code 20003-		MEMBERSHIP & INITIATION FEES
Purpose of Disbursement MEMBERSHIP & INITIATION FEES		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Capitol Hill Club		Transaction ID: 61005.E210 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 105.00
City Washington	State DC	
Zip Code 20003-		MEMBERSHIP FEES
Purpose of Disbursement MEMBERSHIP FEES		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1610.00
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 13 / 20

<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. Morgan, Meredith & Associates		Transaction ID: 61005.E203 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 2875 Towerview Road, Suite 1000		Amount of Each Disbursement this Period 8173.49
City Herndon State VA Zip Code 20171-	POLITICAL CONSULTING SERVICES	
Purpose of Disbursement POLITICAL CONSULTING SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Morgan, Meredith & Associates		Transaction ID: 61005.E206 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address 2875 Towerview Road, Suite 1000		Amount of Each Disbursement this Period 500.00
City Herndon State VA Zip Code 20171-	FEC REPORTING & ADMIN SERVICES	
Purpose of Disbursement FEC REPORTING & ADMIN SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Morgan, Meredith & Associates		Transaction ID: 61005.E209 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2875 Towerview Road, Suite 1000		Amount of Each Disbursement this Period 1025.00
City Herndon State VA Zip Code 20171-	FEC REPORTING & ADMIN SERVICES	
Purpose of Disbursement FEC REPORTING & ADMIN SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9698.49
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
<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. U. S. Airways		Transaction ID: 61005.E223 Date of Disbursement 09 / 05 / 2006	
Mailing Address P.O. Box 3591		Amount of Each Disbursement this Period 49.30	
City Janesville State WI Zip Code 53547-	Purpose of Disbursement TRAVEL EXPENSE	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) ▼	TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) B. U. S. Airways		Transaction ID: 61005.E224 Date of Disbursement 09 / 22 / 2006	
Mailing Address P.O. Box 3591		Amount of Each Disbursement this Period 383.30	
City Janesville State WI Zip Code 53547-	Purpose of Disbursement TRAVEL EXPENSE	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) ▼	TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: 61005.E204 Date of Disbursement 07 / 18 / 2006	
Mailing Address 407 Pitney Road		Amount of Each Disbursement this Period 81.25	
City Absecon State NJ Zip Code 08201-	Purpose of Disbursement CELL PHONE SERVICE	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) ▼	CELL PHONE SERVICE	

SUBTOTAL of Disbursements This Page (optional) ▶	513.85
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
<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 61005.E207 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address 407 Pitney Road		Amount of Each Disbursement this Period 81.25
City Absecon State NJ Zip Code 08201-	CELL PHONE SERVICE	
Purpose of Disbursement CELL PHONE SERVICE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 61005.E211 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 407 Pitney Road		Amount of Each Disbursement this Period 81.25
City Absecon State NJ Zip Code 08201-	CELL PHONE SERVICE	
Purpose of Disbursement CELL PHONE SERVICE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

162.50

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

11984.84

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

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

FOR LINE NUMBER:
(check only one)

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<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. Friends of Clay Shaw		Transaction ID: 61005.E212 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address PO Box 2188, 26 NE 14th St. Cause		Amount of Each Disbursement this Period 2000.00
City Fort Lauderdale State FL Zip Code 33303-	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		
Candidate Name E CLAY JR SHAW		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Heather Wilson for Congress		Transaction ID: 61005.E217 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P. O. Box 14070		Amount of Each Disbursement this Period 2500.00
City Albuquerque State NM Zip Code 87191-	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		
Candidate Name HEATHER A. WILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jim Gerlach for Congress Committee		Transaction ID: 61005.E214 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 911 Welsh Ayres Way		Amount of Each Disbursement this Period 1000.00
City Downingtown State PA Zip Code 19335-	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		
Candidate Name JIM GERLACH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
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 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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. Martha Rainville for Congress		Transaction ID: 61005.E208 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO Box 505		Amount of Each Disbursement this Period 5000.00	
City Williston State VT Zip Code 05495-	Purpose of Disbursement Candidate Name MARTHA T RAINVILLE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Northup for Congress		Transaction ID: 61005.E220 Date of Disbursement 09 / 29 / 2006	
Mailing Address P.O. Box 7313		Amount of Each Disbursement this Period 1000.00	
City Louisville State KY Zip Code 40257-	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name ANNE M. NORTHUP Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type POLITICAL CONTRIBUTION

Full Name (Last, First, Middle Initial) C. Pryce for Congress		Transaction ID: 61005.E215 Date of Disbursement 09 / 28 / 2006	
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 1000.00	
City Columbus State OH Zip Code 43215-	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name DEBORAH D. PRYCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type POLITICAL CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

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<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial) A. Pryce for Congress		Transaction ID: 61005.E218 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 4000.00
City Columbus State OH Zip Code 43215-	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name DEBORAH D. PRYCE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Schmidt For Congress Committee		Transaction ID: 61005.E219 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 771 Wards Corner Road		Amount of Each Disbursement this Period 1000.00
City Loveland State OH Zip Code 45140-	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name JEANNETTE H SCHMIDT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Steve Chabot for Congress		Transaction ID: 61005.E213 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 3339 Harrison Ave., 3014 Harison A		Amount of Each Disbursement this Period 1000.00
City Cincinnati State OH Zip Code 45211-	POLITICAL CONTRIBUTION	
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name STEVE CHABOT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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<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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial)

A. Turner for Congress

Mailing Address 131 N. Ludlow St., Ste. 317

City Dayton State OH Zip Code 45402-

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
MIKE TURNER

Office Sought: House
 Senate
 President

State: OH District: 03

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 61005.E221

Date of Disbursement

/ /

Amount of Each Disbursement this Period

POLITICAL CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

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 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)
Leadership Encouraging Excellence PAC

Full Name (Last, First, Middle Initial)

A. The Wish List

Mailing Address 333 North Fairfax St., Ste. 302

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement
NON-FEDERAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61005.E216

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00