

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MasterCard International Inc. Employees' PAC

ADDRESS (number and street) 2000 Purchase St.
 Check if different than previously reported. (ACC)
Purchase NY 10577

2. **FEC IDENTIFICATION NUMBER** C00410274
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2010 through 08 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Christine Maiolo

Signature of Treasurer Electronically Filed by Christine Maiolo Date 09 15 2010

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MasterCard International Inc. Employees' PAC

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		81932.47
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	139562.30									
(c) Total Receipts (from Line 19)	8052.50	97333.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	147614.80	179265.47								
7. Total Disbursements (from Line 31)	3034.43	34685.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	144580.37	144580.37								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7627.50	86557.50
(ii) Unitemized	425.00	10775.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8052.50	97333.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	8052.50	97333.00
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))	8052.50	97333.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8052.50	97333.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	34.43	951.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	34.43	951.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	33100.00
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	633.99
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))..	3034.43	34685.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3034.43	34685.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	8052.50	97333.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8052.50	97333.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34.43	951.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	34.43	951.11

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 7 / 25
	<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	

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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Gregory Box	Date of Receipt MM / DD / YYYY 08 / 15 / 2010
	Mailing Address 2200 Mastercard Blvd	Transaction ID: 20100811-5-11-14
	City State Zip Code O Fallon MO 63368-7263	Amount of Each Receipt this Period 62.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard	Occupation VP Technology Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 496.00	

B.	Full Name (Last, First, Middle Initial) Joe Casale	Date of Receipt MM / DD / YYYY 08 / 15 / 2010
	Mailing Address 2000 Purchase St	Transaction ID: 20100811-71-11-14
	City State Zip Code Purchase NY 10577-2405	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard	Occupation Business Leader, Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Andrew Cheskis	Date of Receipt MM / DD / YYYY 08 / 15 / 2010
	Mailing Address 100 Manhattanville Rd	Transaction ID: 20100811-17-11-14
	City State Zip Code Purchase NY 10577-2134	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MasterCard	Occupation SVP/General Auditor	
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)	437.00
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 8 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

<p>A. Full Name (Last, First, Middle Initial) Diane Dann</p> <p>Mailing Address 2000 Purchase St</p> <p>City Purchase State NY Zip Code 10577-2405</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MasterCard Occupation VP/Counsel Sr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt 08 / 15 / 2010</p> <p>Transaction ID: 20100811-22-11-14</p> <p>Amount of Each Receipt this Period 50.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Heidi Davidson</p> <p>Mailing Address 2000 Purchase St</p> <p>City Purchase State NY Zip Code 10577-2405</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MasterCard Occupation VP/Director State Govt Affairs</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2800.00</p>	<p>Date of Receipt 08 / 15 / 2010</p> <p>Transaction ID: 20100811-34-11-14</p> <p>Amount of Each Receipt this Period 350.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Colm Dobbyn</p> <p>Mailing Address 2000 Purchase St</p> <p>City Purchase State NY Zip Code 10577-2405</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MasterCard Occupation SVP/Asst. General Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt 08 / 15 / 2010</p> <p>Transaction ID: 20100811-21-11-14</p> <p>Amount of Each Receipt this Period 125.00</p>
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SUBTOTAL of Receipts This Page (optional)	525.00
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 / 25
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Nadia Dombrowski	Date of Receipt MM / DD / YYYY 08 / 15 / 2010
	Mailing Address 2000 Purchase St	Transaction ID: 20100811-60-11-14
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Counsel Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Patrick Dwyer	Date of Receipt MM / DD / YYYY 08 / 15 / 2010
	Mailing Address 2000 Purchase St	Transaction ID: 20100811-54-11-14
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Consumer & Public Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00	

C.	Full Name (Last, First, Middle Initial) Michael Ellison	Date of Receipt MM / DD / YYYY 08 / 15 / 2010
	Mailing Address 2000 Purchase St	Transaction ID: 20100811-46-11-14
	City Purchase State NY Zip Code 10577-2405	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MasterCard Occupation VP/Financial Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	156.00
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 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Lawrence Flanagan

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2509

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

Name of Employer MasterCard Occupation Chief Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3328.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-25-11-14
 Amount of Each Receipt this Period 416.00

B.

Full Name (Last, First, Middle Initial)
Tucker Foote

Mailing Address 1401 I St NW Ste 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 21 / 2010
Transaction ID: 95F2181F4E23F86332B
 Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Gene Galliani

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation Leader, Systems Programming

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-45-11-14
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 591.00

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 11 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Maria Haluska

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Shareholder Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-29-11-14
 Amount of Each Receipt this Period 125.00

B.

Full Name (Last, First, Middle Initial)
Dora Hanft

Mailing Address 670 W End Ave

City New York State NY Zip Code 10025-7313

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

Name of Employer Occupation Spouse of Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 08 / 21 / 2010
Transaction ID: C1CBC4707BEC7F32808
 Amount of Each Receipt this Period 208.00

C.

Full Name (Last, First, Middle Initial)
Noah Hanft

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3328.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-14-11-14
 Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ► 749.00

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 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Robert Hariegel

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Strategic Sourcing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 15 / 2010

Transaction ID: 20100811-28-11-14

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Justin Howe

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Finance Leader, Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1336.00

Date of Receipt 08 / 15 / 2010

Transaction ID: 20100811-53-11-14

Amount of Each Receipt this Period 167.00

C.

Full Name (Last, First, Middle Initial)
Greg Howes

Mailing Address PO Box 25000

City Raleigh State NC Zip Code 27640-0100

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

Name of Employer MasterCard Occupation Global Solutions Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 15 / 2010

Transaction ID: 20100811-64-11-14

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► **317.00**

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 13 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
James Hull

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Engineering Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 992.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2010

Transaction ID: 20100811-30-11-14

Amount of Each Receipt this Period
124.00

B.

Full Name (Last, First, Middle Initial)
Joan Kelly

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Enhancement Stratg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2320.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2010

Transaction ID: 20100811-2-11-14

Amount of Each Receipt this Period
290.00

C.

Full Name (Last, First, Middle Initial)
Claire Le Gal

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2509

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

Name of Employer MasterCard Occupation Business Leader, Fraud Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2010

Transaction ID: 20100811-24-11-14

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **464.00**

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 14 / 25

(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Michael Manchisi

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3328.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-18-11-14

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)
Kimberly Martin

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-3-11-14

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3328.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-49-11-14

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional) ►

872.00

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 15 / 25

(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

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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 1 0

Transaction ID: 20100811-12-11-14

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Counsel Sr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 1 0

Transaction ID: 20100811-19-11-14

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Associate General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3328.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 1 0

Transaction ID: 20100811-35-11-14

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional) ▶

616.00

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 16 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Ave Ste 130

City Miami State FL Zip Code 33131-2951

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 992.00

Date of Receipt 08 / 15 / 2010

Transaction ID: 20100811-52-11-14

Amount of Each Receipt this Period 124.00

B.

Full Name (Last, First, Middle Initial)
Heather Nolan

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Franchise Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 15 / 2010

Transaction ID: 20100811-36-11-14

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Patrick O'Sullivan

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 992.00

Date of Receipt 08 / 15 / 2010

Transaction ID: 20100811-16-11-14

Amount of Each Receipt this Period 124.00

SUBTOTAL of Receipts This Page (optional) ► 298.00

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 17 / 25
(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

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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Steve Potter

Mailing Address 9830 Colonnade Blvd Ste 170

City San Antonio State TX Zip Code 78230-2297

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

Name of Employer MasterCard Occupation Account Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-73-11-14
 Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Bob Reany

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Information Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-10-11-14
 Amount of Each Receipt this Period 110.00

C.

Full Name (Last, First, Middle Initial)
Rob Reeg

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation SVP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3328.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-9-11-14
 Amount of Each Receipt this Period 416.00

SUBTOTAL of Receipts This Page (optional) ▶ **626.00**

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 18 / 25

(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Trina Reuben-Williams

Mailing Address 100 Manhattanville Rd

City State Zip Code
Purchase NY 10577-2134

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

Name of Employer Occupation
MasterCard Managing Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-63-11-14

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Nat Paul Rosenberg

Mailing Address 8755 W Higgins Rd

City State Zip Code
Chicago IL 60631-2708

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

Name of Employer Occupation
MasterCard VP/Team Lead NA Business Dev

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-26-11-14

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Richard Santoro

Mailing Address 1401 I St NW Ste 2

City State Zip Code
Washington DC 20005-2225

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

Name of Employer Occupation
MasterCard Business Leader, Public Policy

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-74-11-14

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ►

180.00

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 19 / 25

(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Joe Schuler

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Leader, Systems Programming

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-42-11-14

Amount of Each Receipt this Period
85.00

B.

Full Name (Last, First, Middle Initial)
Eileen Simon

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Associate General Counsel

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-31-11-14

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Edgar Smart

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Support

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 992.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-32-11-14

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional)

309.00

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 20 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Patricia Smith-Thurman

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation Group Head, Info Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2010

Transaction ID: 20100811-7-11-14

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Bella Stavchansky

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer MasterCard Occupation General Manager, Eastern Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2010

Transaction ID: 20100811-20-11-14

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 992.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2010

Transaction ID: 20100811-37-11-14

Amount of Each Receipt this Period
124.00

SUBTOTAL of Receipts This Page (optional) ► **466.00**

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 21 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 08 / 15 / 2010
Transaction ID: 20100811-33-11-14
 Amount of Each Receipt this Period: 150.00

B.

Full Name (Last, First, Middle Initial)
Stephen Treacy

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Business Leader, Fraud Reporting and A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 08 / 15 / 2010
Transaction ID: 20100811-69-11-14
 Amount of Each Receipt this Period: 37.50

C.

Full Name (Last, First, Middle Initial)
Robert Trende

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 15 / 2010
Transaction ID: 20100811-1-11-14
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **237.50**

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 22 / 25
(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2320.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-58-11-14
 Amount of Each Receipt this Period 290.00

B.

Full Name (Last, First, Middle Initial)
Jeroen Van Erven

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-41-11-14
 Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Timothy Westendorf

Mailing Address 2200 Mastercard Blvd

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Financial Systems

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 15 / 2010
Transaction ID: 20100811-39-11-14
 Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ► 490.00

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 23 / 25

(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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Mimi Wood

Mailing Address 2000 Purchase St

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard VP/Human Resources

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 992.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-44-11-14

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)
Kent Young

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Business Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1040.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-43-11-14

Amount of Each Receipt this Period

130.00

C.

Full Name (Last, First, Middle Initial)
Kelly Zabel

Mailing Address 2200 Mastercard Blvd

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Audit Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2010

Transaction ID: 20100811-57-11-14

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

294.00

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

7627.50

**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 24 / 25

<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A6E6E3FA1649D6DC8A4 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 3.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A251079AC07A25B9861 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 9.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 775C7577303A46838EE Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 21.93
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

34.43

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

34.43

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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Friends of Dan Maffei <hr/> Mailing Address PO Box 74 <hr/> City Syracuse State NY Zip Code 13214 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Daniel Benjamin Maffei <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E686D31A877E7391763 Date of Disbursement 08 / 03 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Scott Murphy for Congress <hr/> Mailing Address 5 South Side Dr. #224 <hr/> City Clifton Park State NY Zip Code 12065 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Scott Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 424438B0218777CB179 Date of Disbursement 08 / 03 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sensenbrenner Committee <hr/> Mailing Address PO Box 575 <hr/> City Brookfield State WI Zip Code 53008 <hr/> Purpose of Disbursement 2010 Primary Candidate Name F. James Sensenbrenner, Jr. <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 79F6464B0E8EFF76613 Date of Disbursement 08 / 17 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

3000.00