

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

NORPAC

ADDRESS (number and street) PO Box 5595
 Check if different than previously reported. (ACC)
Englewood NJ 07631

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00247403

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |
- Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|
- Election on _____ in the State of _____

5. Covering Period 1 1 2 8 2 0 0 6 through 1 2 3 1 2 0 0 6

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 Joel Davidson

Signature of Treasurer Electronically Filed by Joel Davidson Date 0 1 3 0 2 0 0 7

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								
-----------------	--	--	--	--	--	--	--	--

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NORPAC

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

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		382299.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	380405.40									
(c) Total Receipts (from Line 19)	45987.80	278086.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	426393.20	660385.34								
7. Total Disbursements (from Line 31)	16737.73	250729.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	409655.47	409655.47								
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
NORPAC

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

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	44999.00	221024.75
(i) Itemized (use Schedule A)	125.00	42588.35
(ii) Unitemized	45124.00	263613.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	45124.00	263613.10
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)	15.00	1022.33
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	848.80	8450.91
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))	45987.80	278086.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45987.80	278086.34

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.....	11612.73	137525.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11612.73	137525.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	106564.00
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	5125.00	6640.00
(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))	5125.00	6640.00
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))..	16737.73	250729.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	16737.73	250729.87

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)	45124.00	263613.10
34. Total Contribution Refunds (from Line 28(d))	5125.00	6640.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39999.00	256973.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11612.73	137525.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	15.00	1022.33
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11597.73	136503.54

**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 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Gail Billig		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 6
Mailing Address 311 Walnut St.		Transaction ID: SA11A1.17561
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 1800.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer none Occupation retired	Aggregate Year-to-Date ▼ 1800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dorron Brouard		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 5 Fox Run Dr.		Transaction ID: SA11A1.17553
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer self Occupation sales	Aggregate Year-to-Date ▼ 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ben Chouake		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.17596
City State Zip Code Englewood NJ 07666	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	check to McCain '08 Exploratory Cmte	
Name of Employer Emergimed Occupation Physician	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

SUBTOTAL of Receipts This Page (optional) ▶	1820.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Ben Chouake		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.17568	
City State Zip Code Englewood NJ 07666	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C		member	
Name of Employer Emergimed	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4475.00		

Full Name (Last, First, Middle Initial) B. Etzioni Partners, LLC		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 411 Hackensack Ave 5th Floor		Transaction ID: SA11A1.17616	
City State Zip Code Hackensack NJ 07601	Amount of Each Receipt this Period 4200.00		
FEC ID number of contributing federal political committee. C		Partnership check to McCain in 2008 Explor	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Victoria Feder		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 105 Hudson St		Transaction ID: SA11A1.17621	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 840.00		
FEC ID number of contributing federal political committee. C		Etzioni check to McCain Exploratory Cmte	
Name of Employer none		Occupation homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶	700.00
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: (check only one)	PAGE 8 / 35
	<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

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)
NORPAC

A. Full Name (Last, First, Middle Initial) Esther Fridman		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 5 / 2 0 0 6	
Mailing Address 826 Winthrop Rd		Transaction ID: SA11A1.17571	
City State Zip Code Teaneck NJ 07666		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		mission	
Name of Employer none Occupation housewife			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 415.00	

B. Full Name (Last, First, Middle Initial) Morton Fridman		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 5 / 2 0 0 6	
Mailing Address 826 Winthrop Rd		Transaction ID: SA11A1.17570	
City State Zip Code Teaneck NJ 07666		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		mission	
Name of Employer Self Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1363.75	

C. Full Name (Last, First, Middle Initial) Felix Glaubach		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address 5 Lighthouse Rd		Transaction ID: SA11A1.17599	
City State Zip Code Kings Point NY 11024		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		check to McCain '08 Exploratory Cmte	
Name of Employer Personal Touch Homecare Occupation CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional) ▶	325.00
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 / 35
	<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

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)
NORPAC

A. Full Name (Last, First, Middle Initial)
Anne Gontownik

Mailing Address 250 Mountain Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer none Occupation homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.17550

Amount of Each Receipt this Period
125.00

member

B. Full Name (Last, First, Middle Initial)
Jerry Gontownik

Mailing Address 250 Mountain Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Stone Post Realty Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.17549

Amount of Each Receipt this Period
4875.00

member

C. Full Name (Last, First, Middle Initial)
Robert Goodman

Mailing Address 473 Winthrop Rd.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Columbia University Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.17559

Amount of Each Receipt this Period
4875.00

member

SUBTOTAL of Receipts This Page (optional)	▶	9875.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Jack Gross		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 6
Mailing Address 1990 Presidential Dr.		Transaction ID: SA11A1.17656
City State Zip Code Whitehall PA 18052	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer Self Occupation Developer	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jack Halpern		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 160 W. 66th St.		Transaction ID: SA11A1.17595
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	check to McCain '08 Exploratory Cmte	
Name of Employer Atlantic Realty Occupation Real Estate	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. Esther Hershenbaum		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.17597
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	credit card to McCain'08E-xploratory Cmte	
Name of Employer Cliffside Medical Occupation Physician	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 35
	<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	

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Esther Hershenbaum		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.17542
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	check to Joe Biden's Unite Our States	
Name of Employer Cliffside Medical	Occupation Physician	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Esther Hershenbaum		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.17569
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer Cliffside Medical	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4790.00	

Full Name (Last, First, Middle Initial) C. Debbie Jonas		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6
Mailing Address 3020 Palisade Ave		Transaction ID: SA11A1.17564
City State Zip Code Bronx NY 10463	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer none	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5700.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Howard Jonas		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 6
Mailing Address 3020 Palisade Ave.		Transaction ID: SA11A1.17563
City State Zip Code Bronx NY 10463	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer IDT Occupation CEO	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Monique Katz		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 300 E Linden Ave		Transaction ID: SA11A1.17593
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	check to McCain '08 Exploratory Cmte	
Name of Employer Columbia Presbyterian Occupation MD	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. Mordecai Katz		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 300 E. Linden Ave.		Transaction ID: SA11A1.17592
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	check to McCain '08 Exploratory Cmte	
Name of Employer Self Occupation Physician	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 35
	<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)
NORPAC

A. Full Name (Last, First, Middle Initial)
Leon Kozak

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

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

Transaction ID: SA11A1.17591

Amount of Each Receipt this Period
2100.00

check to McCain '08 Exploratory Cmte

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Robert Lebovics

Mailing Address 156 Dwight Pl.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.17556

Amount of Each Receipt this Period
1000.00

member

C. Full Name (Last, First, Middle Initial)
Robert Lebovics

Mailing Address 156 Dwight Pl.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.17598

Amount of Each Receipt this Period
1000.00

credit card to McCain'08E-xploratory Cmte

[MEMO ITEM]

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Bennett Lindenbaum		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 2373 Broadway #1706		Transaction ID: SA11A1.17619
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 840.00	
FEC ID number of contributing federal political committee. C	Etzioni check to McCain Exploratory Cmte	
Name of Employer Basswood Partners, LLC Occupation hedge fund manager	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Marcel Lindenbaum		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 1080 Nine Acres Ln		Transaction ID: SA11A1.17589
City State Zip Code Mamaroneck NY 10543	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	check to McCain '08 Exploratory Cmte	
Name of Employer MGS Corp Occupation Chairman	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Matthew Lindenbaum		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 131 E 92 St		Transaction ID: SA11A1.17620
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 840.00	
FEC ID number of contributing federal political committee. C	Etzioni check to McCain Exploratory Cmte	
Name of Employer Basswood partners LLC Occupation hedge fund manager	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 35
	<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)
NORPAC

A. Full Name (Last, First, Middle Initial)
Nathan J. Lindenbaum

Mailing Address 464 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
MGS Corp. Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

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

Transaction ID: SA11A1.17618

Amount of Each Receipt this Period
840.00

Etzioni check to McCain Exploratory Cmte

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Nathan J. Lindenbaum

Mailing Address 464 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
MGS Corp. Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1925.00

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

Transaction ID: SA11A1.17658

Amount of Each Receipt this Period
1800.00

member

C. Full Name (Last, First, Middle Initial)
Jessica Muss

Mailing Address 181 E 90th St. Apt 18C

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

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

Transaction ID: SA11A1.17551

Amount of Each Receipt this Period
3000.00

member

SUBTOTAL of Receipts This Page (optional)	▶	4800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 35
	<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	

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)
NORPAC

A. Full Name (Last, First, Middle Initial)
Muss Development LLC

Mailing Address 118-35 Queens Blvd

City State Zip Code
Forest Hills NY 11375

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

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

Transaction ID: SA11A1.17647

Amount of Each Receipt this Period
2100.00

Partner Joshua Muss to McCain 2008 Explor

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Muss Development LLC

Mailing Address 118-35 Queens Blvd

City State Zip Code
Forest Hills NY 11375

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

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

Transaction ID: SA11A1.17650

Amount of Each Receipt this Period
1050.00

Partner Jason Muss to McCain 2008 Explor

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
John Nanasi

Mailing Address 265 Mountain Rd.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Self Jewelry manufacturer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.17558

Amount of Each Receipt this Period
2500.00

member

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Stanley Raskas		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 6
Mailing Address 301 Overlook Rd		Transaction ID: SA11A1.17554
City State Zip Code New Rochelle NY 10804	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer Occupation The Oxbridge Group Partner	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Ethel Scher		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 6
Mailing Address 3333 Henry Hudson Pkwy		Transaction ID: SA11A1.17557
City State Zip Code Bronx NY 10463	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer Occupation Retired	Aggregate Year-to-Date 293.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Herbert Seif		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 251 East Linden Avenue		Transaction ID: SA11A1.17562
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	member	
Name of Employer Occupation O'Connor & Associates Investments	Aggregate Year-to-Date 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	6050.00
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 18 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Ronald Stanton		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 6	
Mailing Address PO Box 7		Transaction ID: SA11A1.17587	
City North Salem	State NY	Zip Code 10560	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		check to McCain '08 Exploratory Cmte	
Name of Employer Transammonia Inc	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Howard Stotsky		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 8 / 2 0 0 6	
Mailing Address 77 Dwight Pl.		Transaction ID: SA11A1.17566	
City Englewood	State NJ	Zip Code 07631	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		member	
Name of Employer Self	Occupation Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. St Paul Travellers Indemnity		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 6	
Mailing Address POB 96596		Transaction ID: SA11A1.17547	
City Chicago	State IL	Zip Code 60693-6596	Amount of Each Receipt this Period 104.00
FEC ID number of contributing federal political committee. C		Reimbursement of overpayment	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	1104.00
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: (check only one)	PAGE 19 / 35
	<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Moshael Straus		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 140 S. Woodland St.		Transaction ID: SA11A1.17586
City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C	check to McCain '08 Exploratory Cmte	
Name of Employer Occupation Multicare Management Executive	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) B. Abigail Tambor		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 115 86 St		Transaction ID: SA11A1.17617
City State Zip Code New York NY 11028	Amount of Each Receipt this Period 840.00	
FEC ID number of contributing federal political committee. C	Etzioni check to McCain Exploratory Cmte	
Name of Employer Occupation none homemaker	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) C. Jeffrey Weinstein		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address 11 Anthony Ave.		Transaction ID: SA11A1.17573
City State Zip Code Edison NJ 08820	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	In-kind - Knowlegis software purchase	
Name of Employer Occupation James St. Anesthesia Physician	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5000.00
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 20 / 35	
	(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"/> 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)
NORPAC

A. Full Name (Last, First, Middle Initial)
Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City Edison State NJ Zip Code 08820

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

Name of Employer James St. Anesthesia Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	6

Transaction ID: SA11A1.17572

Amount of Each Receipt this Period
125.00

mission

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	44999.00

**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 21 / 35
	<input 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 checked="" 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)
NORPAC

Full Name (Last, First, Middle Initial) A. Valley National Bank		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1445 Valley Rd		Transaction ID: SA17.17536
City State Zip Code Wayne NJ 07470	Amount of Each Receipt this Period 1.81	
FEC ID number of contributing federal political committee. C	credit card interest income	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 7603.92	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Valley National Bank		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1445 Valley Rd		Transaction ID: SA17.17539
City State Zip Code Wayne NJ 07470	Amount of Each Receipt this Period 435.78	
FEC ID number of contributing federal political committee. C	sweep account interest income	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 8039.70	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Valley National Bank		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 1445 Valley Rd		Transaction ID: SA17.17537
City State Zip Code Wayne NJ 07470	Amount of Each Receipt this Period 4.23	
FEC ID number of contributing federal political committee. C	credit card interest income	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 8043.93	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	441.82
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 22 / 35	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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 checked="" 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) NORPAC

Full Name (Last, First, Middle Initial) A. Valley National Bank		Date of Receipt
Mailing Address 1445 Valley Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City	State	Zip Code
Wayne	NJ	07470
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA17.17540
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="406.98"/>
	<input type="text" value="8450.91"/>	sweep account interest income

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="406.98"/>
TOTAL This Period (last page this line number only)	<input type="text" value="848.80"/>

**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 23 / 35

<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)
NORPAC

Full Name (Last, First, Middle Initial) A. ADP Benefit Services		Transaction ID: SB21B.17579																					
Mailing Address 4900 University Ave - MS14		Date of Disbursement																					
City West Des Moines State IA Zip Code 50266		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	4		2	0	0	6														
Purpose of Disbursement Jan 2007 health insur - Davidson		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">350.94</td> </tr> </table>		350.94																			
350.94																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: SB21B.17576																					
Mailing Address 1551 S. Washington Ave.		Date of Disbursement																					
City Piscataway State NJ Zip Code 08854		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	1		2	0	0	6														
Purpose of Disbursement payroll Nunez and Davidson		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">1398.88</td> </tr> </table>		1398.88																			
1398.88																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B.17577																					
Mailing Address 1551 S. Washington Ave.		Date of Disbursement																					
City Piscataway State NJ Zip Code 08854		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	1		2	0	0	6														
Purpose of Disbursement taxes		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">553.18</td> </tr> </table>		553.18																			
553.18																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)	2303.00
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 24 / 35

<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)
NORPAC

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: SB21B.17578 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 1551 S. Washington Ave.		Amount of Each Disbursement this Period 195.56
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement invoice Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: SB21B.17580 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 1551 S. Washington Ave.		Amount of Each Disbursement this Period 1346.85
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement payroll - Davidson Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B.17581 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6
Mailing Address 1551 S. Washington Ave.		Amount of Each Disbursement this Period 516.33
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2058.74
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 25 / 35

<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)
NORPAC

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: SB21B.17584	
Mailing Address 1551 S. Washington Ave.		Date of Disbursement 12 / 29 / 2006	
City Piscataway	State NJ	Zip Code 08854	Amount of Each Disbursement this Period 1344.93
Purpose of Disbursement payroll - Davidson		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: SB21B.17585	
Mailing Address 1551 S. Washington Ave.		Date of Disbursement 12 / 29 / 2006	
City Piscataway	State NJ	Zip Code 08854	Amount of Each Disbursement this Period 518.25
Purpose of Disbursement taxes		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B.17640	
Mailing Address 1551 S. Washington Ave.		Date of Disbursement 12 / 29 / 2006	
City Piscataway	State NJ	Zip Code 08854	Amount of Each Disbursement this Period 89.92
Purpose of Disbursement payroll - Davidovics		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1953.10
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 26 / 35

<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)
NORPAC

Full Name (Last, First, Middle Initial) A. paypal		Transaction ID: SB21B.17541 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address PO Box 45950		Amount of Each Disbursement this Period 55.17
City Omaha State NE Zip Code 68145	Purpose of Disbursement service fee Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Valley National Bank		Transaction ID: SB21B.17665 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 1445 Valley Rd		Amount of Each Disbursement this Period 21.83
City Wayne State NJ Zip Code 07470	Purpose of Disbursement credit card processing fee Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Valley National Bank		Transaction ID: SB21B.17582 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 6
Mailing Address 1445 Valley Rd		Amount of Each Disbursement this Period 137.49
City Wayne State NJ Zip Code 07470	Purpose of Disbursement credit card travel and supplies Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	214.49
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)

<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)
NORPAC

Full Name (Last, First, Middle Initial) A. Valley National Bank		Transaction ID: SB21B.17534	
Mailing Address 1445 Valley Rd		Date of Disbursement 12 / 31 / 2006	
City Wayne	State NJ	Zip Code 07470	Amount of Each Disbursement this Period 10.62
Purpose of Disbursement credit card processing fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Verizon wireless		Transaction ID: SB21B.17583	
Mailing Address PO Box 17120		Date of Disbursement 12 / 28 / 2006	
City Tucson	State AZ	Zip Code 85731	Amount of Each Disbursement this Period 72.78
Purpose of Disbursement phone service		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Jeffrey Weinstein		Transaction ID: SB21B.17574	
Mailing Address 11 Anthony Ave.		Date of Disbursement 12 / 04 / 2006	
City Edison	State NJ	Zip Code 08820	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement In-kind - Knowlegis software purchase		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	5083.40
TOTAL This Period (last page this line number only)	11612.73

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 28 / 35

<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17603 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Moshael Straus		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
		[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) B. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17606 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Ronald Stanton		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
		[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17607 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Marcel Lindenbaum		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
		[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 29 / 35

<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17608 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Leon Kozak		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
		[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) B. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17609 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Mordecai Katz		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
		[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17611 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Jack Halpern		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
		[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 30 / 35

<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17612 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Ben Chouake		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
Candidate Name JOHN S MCCAIN		011 Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: District: 00	2008																					

Full Name (Last, First, Middle Initial) B. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17613 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Felix Glaubach		Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Candidate Name JOHN S MCCAIN		011 Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: District: 00	2008																					

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17614 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement credit card from Esther Hershenbaum		Amount of Each Disbursement this Period <table border="1"><tr><td>2000.00</td></tr></table>	2000.00																			
2000.00																						
Candidate Name JOHN S MCCAIN		011 Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: District: 00	2008																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17623 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	6														
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Etzioni Partners check		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>4200.00</td></tr></table>	4200.00																			
4200.00																						
		[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) B. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17625 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	6														
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Etzioni check from Abigail Tambor		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>840.00</td></tr></table>	840.00																			
840.00																						
		[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17626 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	6														
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Etzioni check from Nathan Lindenbaum		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						
		Amount of Each Disbursement this Period <table border="1"><tr><td>840.00</td></tr></table>	840.00																			
840.00																						
		[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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 32 / 35

<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17627 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	6														
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Etzioni check from Bennett Lindenbaum		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						

Amount of Each Disbursement this Period

840.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17628 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	6														
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Etzioni check from Matthew Lindenbaum		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						

Amount of Each Disbursement this Period

840.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17629 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	6														
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Etzioni check from Victoria Feder		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00																						

Amount of Each Disbursement this Period

840.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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 33 / 35

<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17648 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Muss Development check from Joshua Muss		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
Candidate Name JOHN S MCCAIN		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																			
011																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: District: 00																						

Full Name (Last, First, Middle Initial) B. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17610 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	8		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement check from Monique Katz		Amount of Each Disbursement this Period <table border="1"><tr><td>2100.00</td></tr></table>	2100.00																			
2100.00																						
Candidate Name JOHN S MCCAIN		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																			
011																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: District: 00																						

Full Name (Last, First, Middle Initial) C. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17615 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	8		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement credit card from Bob Lebovics		Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Candidate Name JOHN S MCCAIN		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																			
011																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: District: 00																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 / 35

<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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. JOHN MCCAIN 2008-THE EXPLORATORY COMMITTEE INC		Transaction ID: SB23.17633 Date of Disbursement																				
Mailing Address PO BOX 16118		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	2		2	0	0	6													
City ARLINGTON	State VA	Zip Code 22215																				
Purpose of Disbursement Muss Development check from Jason Muss		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOHN S MCCAIN																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District: 00	Amount of Each Disbursement this Period <table border="1"><tr><td>1050.00</td></tr></table>		1050.00																			
1050.00																						

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. UNITE OUR STATES		Transaction ID: SB23.17543 Date of Disbursement																				
Mailing Address 513 Capitol Court NE Suite 100 Suite 100		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	8		2	0	0	6													
City Washington	State DC	Zip Code 20002																				
Purpose of Disbursement check from Esther Hershenbaum		<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																			
011																						
Candidate Name JOSEPH R JR BIDEN																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: DE District: 00	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>		1000.00																			
1000.00																						

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		

**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 35 / 35

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

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)
NORPAC

Full Name (Last, First, Middle Initial) A. Jeffrey Weinstein		Transaction ID: SB28A.17642 Date of Disbursement 12 / 18 / 2006	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period 5000.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement reimbursement of in-kind Knowlegis Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jeffrey Weinstein		Transaction ID: SB28A.17645 Date of Disbursement 12 / 28 / 2006	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period 125.00	
City Edison State NJ Zip Code 08820	Purpose of Disbursement refund of Mission 2007 overpayment Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	5125.00
TOTAL This Period (last page this line number only)	5125.00