

# 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  
Impact America

ADDRESS (number and street) 228 W. Washington St., Ste. 115  
 Check if different than previously reported. (ACC)  
Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00354308  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 09 01 2006 through 09 30 2006

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

Signature of Treasurer Electronically Filed by Lisa Lisker Date 10 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Impact America

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		168934.55
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	205328.26									
(c) Total Receipts (from Line 19) .....	26500.00	298500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	231828.26	467434.55								
7. Total Disbursements (from Line 31) .....	120304.71	355911.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	111523.55	111523.55								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
Impact America

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3000.00	50750.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3000.00	50750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	23500.00	247750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	26500.00	298500.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	26500.00	298500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26500.00	298500.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	65304.71	115911.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	65304.71	115911.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	198000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	8000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	8000.00
29. Other Disbursements.....	0.00	34000.00
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))..	120304.71	355911.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	120304.71	355911.00

**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) .....	26500.00	298500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	8000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26500.00	290500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65304.71	115911.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	65304.71	115911.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A.</b> Richard Belas		Date of Receipt M M / D D / Y Y Y Y Y 09 / 05 / 2006
Mailing Address 214 11th St., NE		Transaction ID: 60913.C548
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Davis & Harman Attorney	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>B.</b> Kevin Martin, Sr.		Date of Receipt M M / D D / Y Y Y Y Y 09 / 05 / 2006
Mailing Address 26 Marine Rd		Transaction ID: 60913.C549
City State Zip Code Boston MA 02127-4003	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Self CPA	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	3000.00

# 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 7 / 16
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A.</b> Build PAC-Natl. Assoc. of Home Builders		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 1201 15th St NW		Transaction ID: 61016.C555
City State Zip Code Washington DC 20005-2842	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Occupation	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>B.</b> California Dairies PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO Box 2198		Transaction ID: 61016.C554
City State Zip Code Los Banos CA 93635-2198	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 3000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Lockheed Martin Employees PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address 1550 Crystal Dr Ste 300 Crystal Square Two, Ste. 300		Transaction ID: 60913.C550
City State Zip Code Arlington VA 22202-4135	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> 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 8 / 16
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A.</b> Metlife Inc Employees Particip. Fund A		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address One Metlife Plaza 27-01 Queens Plaza North, Area 4D		Transaction ID: 61016.C551
City State Zip Code Long Island City NY 11101	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> National Academy of Elder Law		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address Attorneys Senior Rights PAC 5775 Peachtree Dunwoody Rd., NE		Transaction ID: 61016.C553
City State Zip Code Atlanta GA 30342	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer	Occupation	
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) <b>C.</b> National Thoroughbred Racing Assoc. PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 2525 Harrodsburgh Rd.		Transaction ID: 61016.C552
City State Zip Code Lexington KY 40504	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Impact America

**A.** Full Name (Last, First, Middle Initial)  
Well Real Estate Funds PAC

Mailing Address 6200 The Corners Pkwy

City	State	Zip Code
Norcross	GA	30092-3365

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

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

Transaction ID: 61016.C556

Amount of Each Receipt this Period  
3000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	23500.00

# 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 10 / 16

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

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A. Bandon Dunes Golf Resort</b>		<b>Transaction ID: 61016.E500</b> Date of Disbursement MM / DD / YYYY 09 / 29 / 2006
Mailing Address 57744 Round Lake Drive		Amount of Each Disbursement this Period 56058.94
City Bandon State OR Zip Code 97411-	Purpose of Disbursement PAC Event Catering/Site Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC EVENT CATERING/SITE RENTAL

Full Name (Last, First, Middle Initial) <b>B. Cups &amp; Co.</b>		<b>Transaction ID: 61016.E485</b> Date of Disbursement MM / DD / YYYY 09 / 07 / 2006
Mailing Address 9210 Bois Ave.		Amount of Each Disbursement this Period 234.30
City Vienna State VA Zip Code 22182-	Purpose of Disbursement PAC Meeting Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC MEETING EXPENSE

Full Name (Last, First, Middle Initial) <b>C. Cups &amp; Co.</b>		<b>Transaction ID: 61016.E495</b> Date of Disbursement MM / DD / YYYY 09 / 22 / 2006
Mailing Address 9210 Bois Ave.		Amount of Each Disbursement this Period 244.65
City Vienna State VA Zip Code 22182-	Purpose of Disbursement PAC Meeting Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC MEETING EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	56537.89
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 11 / 16

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

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A. Carley Dillon-Petty Cash</b>		<b>Transaction ID: 61016.E488</b> Date of Disbursement 09 / 13 / 2006
Mailing Address 326 F St NE		Amount of Each Disbursement this Period 250.00
City Washington State DC Zip Code 20002-4931	Purpose of Disbursement SEE BELOW Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Capital Hill Supermarket</b>		<b>Transaction ID: 61016.E489</b> Date of Disbursement 09 / 13 / 2006
Mailing Address 241 Massachusetts Ave., NE		Amount of Each Disbursement this Period 115.49
City Washington State DC Zip Code 20002-	Purpose of Disbursement PAC Meeting Expense Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: PAC MEETING EXPENSE

Full Name (Last, First, Middle Initial) <b>C. Huckaby Davis Lisker</b>		<b>Transaction ID: 61016.E486</b> Date of Disbursement 09 / 07 / 2006
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 1091.84
City Alexandria State VA Zip Code 22314-	Purpose of Disbursement Accounting/Compliance Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ACCOUNTING/COMPLIANCE SERVICES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1341.84
<b>TOTAL</b> 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 12 / 16

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

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A. Huckaby Davis Lisker</b>		<b>Transaction ID:</b> 61016.E494 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 372.92
City Alexandria State VA Zip Code 22314-	ACCOUNTING/COMPLIANCE SERVICES	
Purpose of Disbursement Accounting/Compliance Services Candidate Name		001 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>B. Pearson &amp; Associates</b>		<b>Transaction ID:</b> 61016.E483 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address 1331 H St., NW 12th Fl.		Amount of Each Disbursement this Period 6000.00
City Washington State DC Zip Code 20005-	PAC FUNDRAISING CONSULTING	
Purpose of Disbursement PAC Fundraising Consulting Candidate Name		003 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>C. Gordon Smith</b>		<b>Transaction ID:</b> 61016.E487 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address 404 Russell		Amount of Each Disbursement this Period 769.60
City Washington State DC Zip Code 20510-	PAC TRAVEL	
Purpose of Disbursement PAC Travel Candidate Name		002 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7142.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A. US Bank Visa</b>		<b>Transaction ID:</b> 61016.E501 Date of Disbursement 09 / 30 / 2006
Mailing Address PO Box 790429		Amount of Each Disbursement this Period 266.60
City Saint Louis      State MO      Zip Code 63179-	SEE BELOW	
Purpose of Disbursement SEE BELOW		Category/ Type
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Top Hatt Travel</b>		<b>Transaction ID:</b> 61016.E502 Date of Disbursement 09 / 30 / 2006
Mailing Address PO Box 1446		Amount of Each Disbursement this Period 266.60
City Pendleton      State OR      Zip Code 97801-0890	[MEMO ITEM] MEMO: PAC TRAVEL	
Purpose of Disbursement PAC Travel		Category/ Type 002
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	266.60
<b>TOTAL</b> This Period (last page this line number only) .....	65288.85

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Impact America

<b>A.</b> Full Name (Last, First, Middle Initial) 21st Century Majority Fund		<b>Transaction ID:</b> 61016.E496 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO Box 2274		Amount of Each Disbursement this Period 2500.00
City Atlanta State GA Zip Code 30301-2274	011 Category/ Type  CONTRIBUTION	
Purpose of Disbursement Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>B.</b> Full Name (Last, First, Middle Initial) Bob Corker for Senate		<b>Transaction ID:</b> 61016.E490 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 518 Georgia Ave Fl 2		Amount of Each Disbursement this Period 5000.00
City Chattanooga State TN Zip Code 37403-3401	011 Category/ Type  PRIMARY DEBT	
Purpose of Disbursement Primary Debt Candidate Name ROBERT P CORKER JR		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 00		

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of George Allen		<b>Transaction ID:</b> 61016.E492 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address PO Box 6859		Amount of Each Disbursement this Period 5000.00
City Arlington State VA Zip Code 22206-0859	011 Category/ Type  CONTRIBUTION	
Purpose of Disbursement Contribution Candidate Name GEORGE ALLEN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A. Friends of Joe Lieberman</b>		Transaction ID: 61016.E493 Date of Disbursement 09 / 18 / 2006
Mailing Address PO Box 231294		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION
City Hartford State CT Zip Code 06123-1294	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name JOSEPH I LIEBERMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Heather Wilson for Congress</b>		Transaction ID: 61016.E491 Date of Disbursement 09 / 18 / 2006
Mailing Address PO Box 14070		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION
City Albuquerque State NM Zip Code 87191-	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name HEATHER A. WILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Oregon Republican Party</b>		Transaction ID: 61016.E498 Date of Disbursement 09 / 26 / 2006
Mailing Address PO Box 789		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION
City Salem State OR Zip Code 97308-	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Impact America

Full Name (Last, First, Middle Initial) <b>A. Rod Grams for Congress</b>		Transaction ID: 61016.E499	
Mailing Address PO Box 15128		Date of Disbursement 09 / 29 / 2006	
City Duluth	State MN	Zip Code 55815-0128	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name RODNEY DWIGHT GRAMS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MN	District: 08		

CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>B. Special Teams 2006</b>		Transaction ID: 61016.E497	
Mailing Address PO Box 75103		Date of Disbursement 09 / 26 / 2006	
City Washington	State DC	Zip Code 20013-0103	Amount of Each Disbursement this Period 25000.00
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	27500.00
<b>TOTAL</b> This Period (last page this line number only) .....	55000.00