

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 PMA Group Political Action Committee

ADDRESS (number and street) 2345 Crystal Drive Suite 300 Arlington VA 22202 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00280321 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2006 through 04 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 Joseph S. Littleton, III

Signature of Treasurer Electronically Filed by Joseph S. Littleton, III Date 05 12 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**

Write or Type Committee Name
PMA Group Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	4

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		51383.36
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	51749.98									
(c) Total Receipts (from Line 19)	13221.98	95088.60								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	64971.96	146471.96								
7. Total Disbursements (from Line 31)	30000.00	111500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34971.96	34971.96								
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
PMA Group Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	4

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	13171.98	94938.60
(i) Itemized (use Schedule A)		
(ii) Unitemized	50.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	13221.98	95088.60
(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) ▶	13221.98	95088.60
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))	13221.98	95088.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13221.98	95088.60

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	111500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30000.00	111500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	30000.00	111500.00

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)	13221.98	95088.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13221.98	95088.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 / 19
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Joe Boessen		Date of Receipt MM / DD / YYYY 04 / 06 / 2006
Mailing Address 5406 Willcoxon Tavern Court		Transaction ID: SA11A1.8177
City Fairfax	State VA	Zip Code 22032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 415.00
Name of Employer The PMA Group, Inc.	Occupation Associate	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00	

Full Name (Last, First, Middle Initial) B. Leo Clark		Date of Receipt MM / DD / YYYY 04 / 06 / 2006
Mailing Address 4411 Santa Clara Court		Transaction ID: SA11A1.8178
City Fairfax	State VA	Zip Code 22030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 415.00
Name of Employer The PMA Group	Occupation Associate	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00	

Full Name (Last, First, Middle Initial) C. Sean Fogarty		Date of Receipt MM / DD / YYYY 04 / 19 / 2006
Mailing Address 9506 Yawl Court		Transaction ID: SA11A1.8195
City Burke	State VA	Zip Code 22015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The PMA Group, Inc.	Occupation Associate	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1830.00
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 / 19
	<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)
PMA Group Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lynn Henselman

Mailing Address 59 Beaver Lodge Road

City State Zip Code
Stafford VA 22556

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

Name of Employer The PMA Group, Inc. Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.64

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

Transaction ID: SA11A1.8182

Amount of Each Receipt this Period
416.66

contribution

B. Full Name (Last, First, Middle Initial)
Gillian Jaeger

Mailing Address 20748 Windmere Court

City State Zip Code
Potomac Falls VA 20165

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

Name of Employer The PMA Group, Inc. Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

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

Transaction ID: SA11A1.8183

Amount of Each Receipt this Period
400.00

contribution

C. Full Name (Last, First, Middle Initial)
Dennis Kedzior

Mailing Address 3086 Tudor Hall Road

City State Zip Code
Riva MD 21140-1324

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

Name of Employer The PMA Group, Inc. Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

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

Transaction ID: SA11A1.8179

Amount of Each Receipt this Period
400.00

contribution

SUBTOTAL of Receipts This Page (optional)	▶	1216.66
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 8 / 19
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Melissa Koloszar		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 106 S Wise Street		Transaction ID: SA11A1.8180	
City Arlington	State VA	Zip Code 22204	Amount of Each Receipt this Period 415.00
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1245.00		

Full Name (Last, First, Middle Initial) B. Joseph S. Littleton, III, III		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 79 Canterbury Drive		Transaction ID: SA11A1.8184	
City Stafford	State VA	Zip Code 22554	Amount of Each Receipt this Period 415.00
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00		

Full Name (Last, First, Middle Initial) C. Kevin Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 4220 Maple Ave		Transaction ID: SA11A1.8185	
City Fairfax	State VA	Zip Code 22032	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00		

SUBTOTAL of Receipts This Page (optional) ▶	1230.00
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 9 / 19
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Matt Miller		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 229 10th Street, NE		Transaction ID: SA11A1.8186
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1648.00	

Full Name (Last, First, Middle Initial) B. Brian Morgan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 8611 Mallard View		Transaction ID: SA11A1.8187
City State Zip Code Fairfax Station VA 22039	Amount of Each Receipt this Period 415.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00	

Full Name (Last, First, Middle Initial) C. Chuck Parkinson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 7327 Laurel Creek Court		Transaction ID: SA11A1.8188
City State Zip Code Springfield VA 22150	Amount of Each Receipt this Period 415.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer The PMA Group	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00	

SUBTOTAL of Receipts This Page (optional) ▶	1246.00
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 10 / 19
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Liz Roberts		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 211 11th Street, SE		Transaction ID: SA11A1.8190
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer The PMA Group	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1664.00	

Full Name (Last, First, Middle Initial) B. Joe Spata		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 7850 Vervain Court		Transaction ID: SA11A1.8191
City State Zip Code Springfield VA 22152	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) C. Scott VandeSand		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 6010 Washington Boulevard		Transaction ID: SA11A1.8192
City State Zip Code Arlington VA 22205	Amount of Each Receipt this Period 416.66	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

SUBTOTAL of Receipts This Page (optional) ▶	1232.66
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 11 / 19
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Tom Veltri		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 713 Hawkins Way		Transaction ID: SA11A1.8193	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 416.66		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1664.98		

Full Name (Last, First, Middle Initial) B. Joseph D Welch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 5812 Cove Landing Road Unit 101		Transaction ID: SA11A1.8175	
City State Zip Code Burke VA 22015	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Fairfax County Police Dep- t.	Occupation Police Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Judith Zink		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 12505 Lolly Post Lane		Transaction ID: SA11A1.8194	
City State Zip Code Woodbridge VA 22192	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	6416.66
TOTAL This Period (last page this line number only) ▶	13171.98

**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 / 19

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. CAPUANO FOR CONGRESS COMMITTEE		Transaction ID: SB23.8217 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address PO BOX 440305		Amount of Each Disbursement this Period 2000.00
City SOMERVILLE State MA Zip Code 02144	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name CAPUANO FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CITIZENS TO ELECT RICK LARSEN		Transaction ID: SB23.8200 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 6
Mailing Address PO Box 326		Amount of Each Disbursement this Period 1000.00
City Everett State WA Zip Code 98206	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name CITIZENS TO ELECT RICK LARSEN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. DOYLE FOR CONGRESS COMMITTEE		Transaction ID: SB23.8213 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 205 HAWTHORNE COURT 2227 Hampton Street		Amount of Each Disbursement this Period 2000.00
City PITTSBURGH State PA Zip Code 15221	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name DOYLE FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 19

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. DOYLE FOR CONGRESS COMMITTEE		Transaction ID: SB23.8214 Date of Disbursement
Mailing Address 205 HAWTHORNE COURT 2227 Hampton Street		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City PITTSBURGH	State PA	Zip Code 15221
Purpose of Disbursement contribution		Amount of Each Disbursement this Period
Candidate Name DOYLE FOR CONGRESS COMMITTEE		<input type="text" value="2000.00"/>
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: PA	District: 14	

Full Name (Last, First, Middle Initial) B. ESHOO, ANNA		Transaction ID: SB23.8205 Date of Disbursement
Mailing Address 555 Capitol Mall Suite 1425		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement contribution		Amount of Each Disbursement this Period
Candidate Name ESHOO, ANNA		<input type="text" value="1000.00"/>
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: CA	District: 14	

Full Name (Last, First, Middle Initial) C. FRIENDS OF DANNY K DAVIS		Transaction ID: SB23.8209 Date of Disbursement
Mailing Address 5956 W RACE AVENUE		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City CHICAGO	State IL	Zip Code 60644
Purpose of Disbursement contribution		Amount of Each Disbursement this Period
Candidate Name FRIENDS OF DANNY K DAVIS		<input type="text" value="1000.00"/>
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: IL	District: 07	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. FRIENDS OF JIM SAXTON		Transaction ID: SB23.8198 Date of Disbursement
Mailing Address PO BOX 795		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City Mount Holly	State NJ	Zip Code 08060
Purpose of Disbursement contribution	<input type="text" value="1000.00"/>	
Candidate Name FRIENDS OF JIM SAXTON	Category/Type	
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: NJ District: 03		

Full Name (Last, First, Middle Initial) B. HOLDEN, T. TIMOTHY		Transaction ID: SB23.8219 Date of Disbursement
Mailing Address 31 Pearl Street		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City SAINT CLAIR	State PA	Zip Code 17970
Purpose of Disbursement contribution	<input type="text" value="2000.00"/>	
Candidate Name HOLDEN, T. TIMOTHY	Category/Type	
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: PA District: 17		

Full Name (Last, First, Middle Initial) C. KAY BAILEY HUTCHISON FOR SENATE		Transaction ID: SB23.8199 Date of Disbursement
Mailing Address P.O. BOX 9190 800 BRAZOS SUITE 1200		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2006"/>
City DALLAS	State TX	Zip Code 75209
Purpose of Disbursement contribution	<input type="text" value="2000.00"/>	
Candidate Name KAY BAILEY HUTCHISON FOR SENATE	Category/Type	
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: TX District: 00		

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

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

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

FOR LINE NUMBER: (check only one)

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

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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. KENNY MARCHANT FOR CONGRESS		Transaction ID: SB23.8202 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 6
Mailing Address PO BOX 110187		Amount of Each Disbursement this Period 1000.00
City CARROLLTON State TX Zip Code 75011	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name KENNY MARCHANT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LEWIS FOR CONGRESS COMMITTEE		Transaction ID: SB23.8224 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 247		Amount of Each Disbursement this Period 1000.00
City REDLANDS State CA Zip Code 92373	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name LEWIS FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. LEWIS FOR CONGRESS COMMITTEE		Transaction ID: SB23.8225 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 247		Amount of Each Disbursement this Period 2000.00
City REDLANDS State CA Zip Code 92373	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name LEWIS FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 19

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. LUNGREN FOR CONGRESS		Transaction ID: SB23.8212 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address 9321 Silverbend Lane		Amount of Each Disbursement this Period 1000.00
City Elk Grove	State CA Zip Code 95624	
Purpose of Disbursement contribution		
Candidate Name LUNGREN FOR CONGRESS		
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: CA District: 03		

Full Name (Last, First, Middle Initial) B. MIKE HONDA FOR CONGRESS		Transaction ID: SB23.8204 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 6
Mailing Address 111 W ST JOHN STREET SUITE 400		Amount of Each Disbursement this Period 500.00
City SAN JOSE	State CA Zip Code 95113	
Purpose of Disbursement contribution		
Candidate Name MIKE HONDA FOR CONGRESS		
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: CA District: 15		

Full Name (Last, First, Middle Initial) C. MOLLOHAN, ALAN B.		Transaction ID: SB23.8207 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6
Mailing Address 727 Mt. Vernon Avenue		Amount of Each Disbursement this Period 1000.00
City Fairmont	State WV Zip Code 26554	
Purpose of Disbursement contribution		
Candidate Name MOLLOHAN, ALAN B.		
Office Sought: <input checked="" 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: WV District: 01		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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 17 / 19

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. PASCRELL FOR CONGRESS INC		Transaction ID: SB23.8215 Date of Disbursement																					
Mailing Address 63 QUARTZ LANE		<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>0</td><td>4</td><td></td><td>2</td><td>5</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	0	4		2	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	5		2	0	0	6														
City PATERSON	State NJ	Zip Code 07501	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution		<input type="checkbox"/>	<input type="text" value="1000.00"/>																				
Candidate Name PASCRELL FOR CONGRESS INC		Category/ Type																					
Office Sought: <input checked="" 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: NJ	District: 08																						

Full Name (Last, First, Middle Initial) B. PASCRELL FOR CONGRESS INC		Transaction ID: SB23.8216 Date of Disbursement																					
Mailing Address 63 QUARTZ LANE		<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>0</td><td>4</td><td></td><td>2</td><td>5</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	0	4		2	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	5		2	0	0	6														
City PATERSON	State NJ	Zip Code 07501	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution		<input type="checkbox"/>	<input type="text" value="1000.00"/>																				
Candidate Name PASCRELL FOR CONGRESS INC		Category/ Type																					
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: NJ	District: 08																						

Full Name (Last, First, Middle Initial) C. PENNSYLVANIANS FOR KANJORSKI		Transaction ID: SB23.8197 Date of Disbursement																					
Mailing Address 103 South Hanover Street		<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>0</td><td>4</td><td></td><td>0</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	0	4		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	4		2	0	0	6														
City Nanticoke	State PA	Zip Code 18634	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution		<input type="checkbox"/>	<input type="text" value="1000.00"/>																				
Candidate Name PENNSYLVANIANS FOR KANJORSKI		Category/ Type																					
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: PA	District: 11																						

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 19

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. SANTORUM 2006		Transaction ID: SB23.8211 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address ONE TOWER BRIDGE SUITE 1440		Amount of Each Disbursement this Period 1000.00
City WEST CONSHOHOCKEN	State PA Zip Code 19428	
Purpose of Disbursement contribution		
Candidate Name SANTORUM 2006		
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: PA District: 00		

Full Name (Last, First, Middle Initial) B. STEPHEN F. LYNCH FOR CONGRESS		Transaction ID: SB23.8222 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 105 Farragut Road		Amount of Each Disbursement this Period 2000.00
City South Boston	State MA Zip Code 02127	
Purpose of Disbursement contribution		
Candidate Name STEPHEN F. LYNCH FOR CONGRESS		
Office Sought: <input checked="" 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: MA District: 09		

Full Name (Last, First, Middle Initial) C. TEXANS FOR HENRY BONILLA		Transaction ID: SB23.8226 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 17292		Amount of Each Disbursement this Period 1500.00
City San Antonio	State TX Zip Code 78217	
Purpose of Disbursement contribution		
Candidate Name TEXANS FOR HENRY BONILLA		
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: TX District: 23		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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 19 / 19

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)
A. TIM RYAN FOR CONGRESS

Transaction ID: SB23.8218

Date of Disbursement

Mailing Address 438 North Rhodes Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	0	6

City Niles State OH Zip Code 44446

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement contribution

Category/
Type

Candidate Name
TIM RYAN FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: OH District: 17

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

30000.00