

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

PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 1131

Check if different than previously reported. (ACC) ANDERSON IN 46015

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

C00383927

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 checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on 11 04 2008 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 10 01 2008 through 10 15 2008

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 Steve Ford

Signature of Treasurer Electronically Filed by Steve Ford Date 10 23 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		2237.28
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	70748.01									
(c) Total Receipts (from Line 19)	18600.00	134876.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	89348.01	137114.03								
7. Total Disbursements (from Line 31)	84470.69	132236.71								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4877.32	4877.32								
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
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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	18500.00	115050.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	100.00	800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	18600.00	115850.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	19000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	18600.00	134850.00
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	26.75
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))	18600.00	134876.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18600.00	134876.75

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.....	7470.69	49736.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	7470.69	49736.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	77000.00	82500.00
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))..	84470.69	132236.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	84470.69	132236.71

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)	18600.00	134850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18600.00	134850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7470.69	49736.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7470.69	49736.71

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

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

FOR LINE NUMBER: PAGE 6 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Josh Bradbury
Mailing Address 26 Shoreline
City Newport Coast State CA Zip Code 92657
FEC ID number of contributing federal political committee. **C**
Name of Employer Teaze of California Inc. Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 10 / 14 / 2008
Transaction ID: SA11AI.6108
Amount of Each Receipt this Period 2500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Verlin Custer
Mailing Address 1744 East 800 North
City Rushville State IN Zip Code 46173
FEC ID number of contributing federal political committee. **C**
Name of Employer Custer Electric Occupation owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 10 / 10 / 2008
Transaction ID: SA11AI.6101
Amount of Each Receipt this Period 500.00
Contribution

C. Full Name (Last, First, Middle Initial)
Druscilla s Doehrmann
Mailing Address PO Box 2165
City Naples State FL Zip Code 34105-2165
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 10 / 10 / 2008
Transaction ID: SA11AI.6097
Amount of Each Receipt this Period 2500.00
Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Brian Martin

Mailing Address 25621 Dillon Rd.

City Laguna Hills State CA Zip Code 92653

FEC ID number of contributing federal political committee. C

Name of Employer RSD Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 11 / 2008

Transaction ID: SA11AI.6106

Amount of Each Receipt this Period 5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Kathlyn Martin

Mailing Address 25621 Dillon Rd.

City Laguna Hills State CA Zip Code 92653

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 11 / 2008

Transaction ID: SA11AI.6107

Amount of Each Receipt this Period 5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Beverly A McArdle

Mailing Address 3530 Rosewood Drive

City Fort Wayne State IN Zip Code 46804-9466

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 10 / 2008

Transaction ID: SA11AI.6099

Amount of Each Receipt this Period 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) 11000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) A. Russell Quilhot		Date of Receipt
	Mailing Address 9464 S. 700 E-92		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Roanoke	IN	46783
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Retired		Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	Transaction ID: SA11AI.6105
			Amount of Each Receipt this Period <input type="text" value="2000.00"/>
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="18500.00"/>

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)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ADP Payroll Services	Transaction ID: SB21B.6113 Date of Disbursement																			
	Mailing Address 7030 Point Inverness Way	<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>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	8												
	City Ft. Wayne State IN Zip Code 46804	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"><tr><td>1723.85</td></tr></table>	1723.85																		
1723.85																					
	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) ▼																			
		001 Category/Type																			

B.	Full Name (Last, First, Middle Initial) ADP Payroll Services	Transaction ID: SB21B.6116 Date of Disbursement																			
	Mailing Address 7030 Point Inverness Way	<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>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	8												
	City Ft. Wayne State IN Zip Code 46804	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"><tr><td>657.22</td></tr></table>	657.22																		
657.22																					
	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) ▼																			
		001 Category/Type																			

C.	Full Name (Last, First, Middle Initial) Ron Arnold	Transaction ID: SB21B.6112 Date of Disbursement																			
	Mailing Address 3709 Tulip St.	<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>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	8												
	City Anderson State IN Zip Code 46011	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Candidate Name	<table border="1"><tr><td>2833.33</td></tr></table>	2833.33																		
2833.33																					
	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) ▼																			
		001 Category/Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5214.40</td></tr></table>	5214.40
5214.40		
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 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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ron Arnold</p> <p>Mailing Address 3709 Tulip St.</p> <p>City Anderson State IN Zip Code 46011</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6117</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="72.95"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Cadick Williams McAllister Ford CPA's</p> <p>Mailing Address 2905 East 46th Street</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6110</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="600.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mikah Wilson</p> <p>Mailing Address 12700 W. Arrowhead Drive</p> <p>City Daleville State IN Zip Code 47334</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6115</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1583.34"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2256.29"/>
TOTAL This Period (last page this line number only)	<input type="text" value="7470.69"/>

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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
ALLEN WEST FOR CONGRESS

Mailing Address PO Box 30786

City State Zip Code
Palm Beach Gardens FL 33420

Purpose of Disbursement
Federal Contribution

Candidate Name
ALLEN B WEST

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 22

Transaction ID: SB23.6177
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
ANDY HARRIS FOR CONGRESS

Mailing Address PO BOX 1527

City State Zip Code
ANNAPOLIS MD 21404

Purpose of Disbursement
Federal Contribution

Candidate Name
ANDREW P HARRIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MD District: 01

Transaction ID: SB23.6210
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
BACHMANN FOR CONGRESS

Mailing Address BOX 49756

City State Zip Code
BLAINE MN 55449

Purpose of Disbursement
Federal Contribution

Candidate Name
MICHELE M BACHMANN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MN District: 06

Transaction ID: SB23.6136
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JOHN STONE	Transaction ID: SB23.6207 Date of Disbursement
	Mailing Address PO Box 2444	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Augusta State GA Zip Code 30903	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Candidate	<input type="text" value="1000.00"/>
	Candidate Name JOHN ERWIN II STONE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT SYDNEY HAY TO CONGRESS	Transaction ID: SB23.6161 Date of Disbursement
	Mailing Address PO BOX 17576	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City MUNDS PARK State AZ Zip Code 86017	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2500.00"/>
	Candidate Name SYDNEY HAY	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVID SCHWEIKERT FOR CONGRESS	Transaction ID: SB23.6156 Date of Disbursement
	Mailing Address 15749 E El Lago	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Fountain Hills State AZ Zip Code 85268	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2500.00"/>
	Candidate Name DAVID SCHWEIKERT	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF DAVE REICHERT	Transaction ID: SB23.6147 Date of Disbursement																			
	Mailing Address P. O. Box 53322	<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>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	8												
	City Bellevue State WA Zip Code 98015	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name DAVE REICHERT	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: WA District: 08	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FRIENDS OF GLENN THOMPSON	Transaction ID: SB23.6204 Date of Disbursement																			
	Mailing Address 198 PARK ROAD	<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>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	8												
	City HOWARD State PA Zip Code 16841	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Candidate	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name GLENN THOMPSON	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: PA District: 05	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FRIENDS OF MIKE SODREL	Transaction ID: SB23.6151 Date of Disbursement																			
	Mailing Address 702 NORTH SHORE DRIVE SUITE 500	<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>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	8												
	City JEFFERSONVILLE State IN Zip Code 47130	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name MICHAEL E SODREL	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: IN District: 09	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>7000.00</td></tr></table>	7000.00
7000.00		
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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) GODDARD FOR CONGRESS <hr/> Mailing Address P.O. Box 9460 <hr/> City Warner Robins State GA Zip Code 31095 <hr/> Purpose of Disbursement Federal Contribution Candidate Name RICHARD NEIL GODDARD <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6186 Date of Disbursement 10 / 13 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) GOODE FOR CONGRESS <hr/> Mailing Address PO BOX 2405 <hr/> City TERRE HAUTE State IN Zip Code 47802 <hr/> Purpose of Disbursement Federal Contribution Candidate Name GREGORY JUSTIN GOODE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6174 Date of Disbursement 10 / 13 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) GUTHRIE FOR CONGRESS <hr/> Mailing Address PO BOX 9639 <hr/> City BOWLING GREEN State KY Zip Code 42102 <hr/> Purpose of Disbursement Federal Contribution Candidate Name STEVEN BRETT GUTHRIE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6195 Date of Disbursement 10 / 13 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	[]

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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) HAYES FOR CONGRESS	Transaction ID: SB23.6148 Date of Disbursement 10 / 13 / 2008
	Mailing Address Post Office Box 2000	Amount of Each Disbursement this Period 1000.00
	City Concord State NC Zip Code 28026	Category/ Type
	Purpose of Disbursement Federal Contribution Candidate Name ROBERT C (ROBIN) HAYES	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) JAY LOVE FOR CONGRESS	Transaction ID: SB23.6168 Date of Disbursement 10 / 13 / 2008
	Mailing Address 1020 Monticello Court, Suite 205	Amount of Each Disbursement this Period 1000.00
	City Montgomery State AL Zip Code 36117	Category/ Type
	Purpose of Disbursement Federal Contribution Candidate Name JAY K LOVE	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) JOHN SHADEGGS FRIENDS	Transaction ID: SB23.6132 Date of Disbursement 10 / 13 / 2008
	Mailing Address PO BOX 45444	Amount of Each Disbursement this Period 2500.00
	City Phoenix State AZ Zip Code 85064	Category/ Type
	Purpose of Disbursement Federal Contributions Candidate Name JOHN B. SHADEGG	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) KELLER FOR CONGRESS <hr/> Mailing Address P.O. Box 1453 <hr/> City Orlando State FL Zip Code 32802 <hr/> Purpose of Disbursement Federal Contribution Candidate Name RICHARD ANTHONY KELLER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6130 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) KNOLLENBERG FOR CONGRESS COMMITTEE <hr/> Mailing Address 31000 Telegraph Road #110 <hr/> City Bingham Farms State MI Zip Code 48025 <hr/> Purpose of Disbursement Federal Contribution Candidate Name JOSEPH K. KNOLLENBERG <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6145 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) KUHLMAN FOR CONGRESS <hr/> Mailing Address 10 GANESVOORT STREET SUITE 101 <hr/> City BATH State NY Zip Code 14810 <hr/> Purpose of Disbursement Federal Contribution Candidate Name JOHN R JR KUHLMAN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6149 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) LINCOLN DIAZ-BALART FOR CONGRESS	Transaction ID: SB23.6137 Date of Disbursement																			
	Mailing Address 95 Merrick Way, Suite 250	<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>0</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	3	/	2	0	0	8												
	City State Zip Code Coral Gables FL 33134	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Purpose of Disbursement Federal Contribution	Category/ Type																			
	Candidate Name LINCOLN DIAZ-BALART																				
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: FL District: 21																				

B.	Full Name (Last, First, Middle Initial) LOU BARLETTA FOR CONGRESS	Transaction ID: SB23.6192 Date of Disbursement																			
	Mailing Address 1529 TERRACE BLVD 101 WEST BROAD 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>1</td><td>0</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	3	/	2	0	0	8												
	City State Zip Code HAZLETON PA 18201	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Purpose of Disbursement Federal Contribution	Category/ Type																			
	Candidate Name LOU BARLETTA																				
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: PA District: 11																				

C.	Full Name (Last, First, Middle Initial) MARIO DIAZ-BALART FOR CONGRESS	Transaction ID: SB23.6140 Date of Disbursement																			
	Mailing Address 95 Merrick Way, Suite 250	<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>0</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	3	/	2	0	0	8												
	City State Zip Code Coral Gables FL 33134	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Purpose of Disbursement Federal Contribution	Category/ Type																			
	Candidate Name MARIO DIAZ-BALART																				
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: FL District: 25																				

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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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 / 26

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MUSGRAVE FOR CONGRESS	Transaction ID: SB23.6128 Date of Disbursement 10 / 13 / 2008
	Mailing Address 5401 STONE CREEK CIRCLE SUITE 777	Amount of Each Disbursement this Period 2500.00
	City LOVELAND State CO Zip Code 80538	Category/ Type
	Purpose of Disbursement Federal Contribution Candidate Name MARILYN N MUSGRAVE	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) NORTHUP FOR CONGRESS	Transaction ID: SB23.6159 Date of Disbursement 10 / 13 / 2008
	Mailing Address PO Box 7313	Amount of Each Disbursement this Period 2500.00
	City Louisville State KY Zip Code 40257	Category/ Type
	Purpose of Disbursement Federal Contribution Candidate Name ANNE M NORTHUP	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) OLSON FOR CONGRESS COMMITTEE	Transaction ID: SB23.6165 Date of Disbursement 10 / 13 / 2008
	Mailing Address PO Box 16381	Amount of Each Disbursement this Period 2500.00
	City Sugar Land State TX Zip Code 77496	Category/ Type
	Purpose of Disbursement Federal Contribution Candidate Name PETER GRAHAM OLSON	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) OZINGA FOR CONGRESS	Transaction ID: SB23.6153 Date of Disbursement
	Mailing Address 19001 OLD LAGRANGE ROAD SUITE 430	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City MOKENA State IL Zip Code 60448	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2500.00"/>
	Candidate Name MARTIN III OZINGA	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: IL District: 11	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PARKER FOR CONGRESS	Transaction ID: SB23.6180 Date of Disbursement
	Mailing Address P.O. Box 16135	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Huntsville State AL Zip Code 35802	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="1000.00"/>
	Candidate Name WAYNE JR. PARKER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: AL District: 05	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PEOPLE WITH HART INC	Transaction ID: SB23.6160 Date of Disbursement
	Mailing Address P.O. Box 435	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Wexford State PA Zip Code 15090	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Contribution	<input type="text" value="2500.00"/>
	Candidate Name MELISSA A. HART	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: PA District: 04	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PORTER FOR CONGRESS</p> <p>Mailing Address PO Box 26087</p> <p>City Las Vegas State NV Zip Code 89126</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name JON C SR PORTER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6146 Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) PUCKETT FOR CONGRESS</p> <p>Mailing Address 4133 S Main Street P.O. Box 245</p> <p>City South Bend State IN Zip Code 46624</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name LUKE WAYNE PUCKETT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6171 Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ROSKAM FOR CONGRESS COMMITTEE</p> <p>Mailing Address 423 W. Wesley Street</p> <p>City Wheaton State IL Zip Code 60189</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name PETER ROSKAM</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6135 Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SALI FOR CONGRESS</p> <p>Mailing Address PO Box 71</p> <p>City KUNA State ID Zip Code 83634</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name WILLIAM T. SALI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6143 Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Sam Graves for Congress</p> <p>Mailing Address 4701 NW 82nd Street</p> <p>City Kansas City State MO Zip Code 64151</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name SAMUEL B (SAM) GRAVES</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6121 Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) SCHMIDT FOR CONGRESS COMMITTEE</p> <p>Mailing Address 771 WARDS CORNER ROAD</p> <p>City LOVELAND State OH Zip Code 45140</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name JEANNETTE H SCHMIDT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6144 Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) SOUDER FOR CONGRESS INC.	Transaction ID: SB23.6124 Date of Disbursement																			
	Mailing Address P.O. BOX 40233 P.O. BOX 40233	<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>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	8												
	City FORT WAYNE State IN Zip Code 46804	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name MARK E SOUDER	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: IN District: 03	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) SOUDER FOR CONGRESS INC.	Transaction ID: SB23.6213 Date of Disbursement																			
	Mailing Address P.O. BOX 40233 P.O. BOX 40233	<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>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	0	8												
	City FORT WAYNE State IN Zip Code 46804	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name MARK E SOUDER	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: IN District: 03	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) STEVE AUSTRIA FOR CONGRESS	Transaction ID: SB23.6201 Date of Disbursement																			
	Mailing Address 2537 Obetz Drive	<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>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	8												
	City Beaver creek State OH Zip Code 45434	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Federal Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name STEVE C AUSTRIA	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008																			
	State: OH District: 07	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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**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

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NAME OF COMMITTEE (In Full)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) STEVE CHABOT FOR CONGRESS</p> <p>Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.</p> <p>City Cincinnati State OH Zip Code 45211</p> <p>Purpose of Disbursement Federal Contributions</p> <p>Candidate Name STEVE CHABOT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6125</p> <p>Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) THELMA DRAKE FOR CONGRESS</p> <p>Mailing Address P.O. Box 61480</p> <p>City Virginia Beach State VA Zip Code 23466</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name THELMA D DRAKE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: VA District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6150</p> <p>Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) TIM BEE FOR CONGRESS</p> <p>Mailing Address P.O. Box 31985</p> <p>City Tucson State AZ Zip Code 85751</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name TIMOTHY BEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AZ District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6166</p> <p>Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p>

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)

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TOM FEENEY FOR CONGRESS</p> <p>Mailing Address 1420 Alafaya Trail #103</p> <p>City Oviedo State FL Zip Code 32765</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name TOM FEENEY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 24</p>	<p>Transaction ID: SB23.6133</p> <p>Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) TOM ROONEY FOR CONGRESS</p> <p>Mailing Address 2336 S. East Ocean Blvd. #313</p> <p>City Stuart State FL Zip Code 34996</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name TOM ROONEY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 16</p>	<p>Transaction ID: SB23.6183</p> <p>Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) VERN BUCHANAN FOR CONGRESS</p> <p>Mailing Address P. O. Box 48928</p> <p>City Sarasota State FL Zip Code 34230</p> <p>Purpose of Disbursement Federal Contribution</p> <p>Candidate Name VERNON BUCHANAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 13</p>	<p>Transaction ID: SB23.6134</p> <p>Date of Disbursement 10 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p>

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 26 / 26

<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)
PRINCIPLES EXALT A NATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WALBERG FOR CONGRESS

Transaction ID: SB23.6126

Date of Disbursement

Mailing Address 6769 Teachout Road

^M 1	^M 0	/	^D 1	^D 3	/	^Y 2	^Y 0	^Y 0	^Y 8
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City Tipton State MI Zip Code 49287

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Federal Contribution

--

Category/
Type

Candidate Name
TIMOTHY WALBERG

Office Sought: House
 Senate
 President
State: MI District: 07

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

77000.00
