

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
NARAL Pro-Choice America PAC

ADDRESS (number and street) 1156 15th Street NW Suite 700
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00079541
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 03 01 2009 through 03 31 2009

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 John Botts

Signature of Treasurer Electronically Filed by John Botts Date 04 20 2009

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 | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NARAL Pro-Choice America PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | 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>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 3777.27 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 10782.89 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 11166.05 | 18861.94 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 21948.94 | 22639.21 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 3322.35 | 4012.62 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 18626.59 | 18626.59 | | | | | | | | |
| 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
NARAL Pro-Choice America PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| 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 | 10500.00 | 11100.00 |
| (i) Itemized (use Schedule A) | 665.00 | 7746.00 |
| (ii) Unitemized | 11165.00 | 18846.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 11165.00 | 18846.00 |
| 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.) | 1.05 | 15.94 |
| 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)) | 11166.05 | 18861.94 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 11166.05 | 18861.94 |

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..... | 272.35 | 962.62 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 272.35 | 962.62 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees..... and Other Political Committees..... | 3000.00 | 3000.00 |
| 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 | 50.00 | 50.00 |
| (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)) | 50.00 | 50.00 |
| 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)).. | 3322.35 | 4012.62 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3322.35 | 4012.62 |

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 | 11165.00 | 18846.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 50.00 | 50.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 11115.00 | 18796.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 272.35 | 962.62 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 272.35 | 962.62 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 8
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America PAC

A. Full Name (Last, First, Middle Initial)
Amy Fikes

Mailing Address 500 N Akard Street, Suite 1919

City State Zip Code
Dallas TX 75201-6696

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Bonanza Oil Co. President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C5108864

Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
Clay K. Kirk

Mailing Address 320 E. 72nd Street, #5C

City State Zip Code
New York NY 10021-4769

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-Employed Private Investor

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
03 / 03 / 2009

Transaction ID: C5108868

Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Tara Newmyer

Mailing Address 2355 Marseilles Drive

City State Zip Code
Palm Beach Gardens FL 33410

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Dickstein Shapiro Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 16 / 2009

Transaction ID: C5108863

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 10500.00

TOTAL This Period (last page this line number only) 10500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 7 / 8

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
NARAL Pro-Choice America PAC

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) Global Payment Solutions</p> <p>Mailing Address 10705 Red Run Blvd</p> <p>City Owings Mills State MD Zip Code 21117-5134</p> <p>Purpose of Disbursement Credit card processing fees for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D246288 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p> |
| <p>B. Full Name (Last, First, Middle Initial) Payment Solutions, Inc.</p> <p>Mailing Address PO Box 30217</p> <p>City Bethesda State MD Zip Code 20824-0217</p> <p>Purpose of Disbursement Credit card processing fees for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D246290 Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 54.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) Payment Solutions, Inc.</p> <p>Mailing Address PO Box 30217</p> <p>City Bethesda State MD Zip Code 20824-0217</p> <p>Purpose of Disbursement Credit card processing fees for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D246292 Date of Disbursement 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 95.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

176.50

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

176.50

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 8

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
NARAL Pro-Choice America PAC

A.

Full Name (Last, First, Middle Initial)
SCOTT MURPHY FOR CONGRESS

Transaction ID: D246291

Date of Disbursement

Mailing Address 615 Glen Street

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 7 | | 2 | 0 | 0 | 9 |

City State Zip Code
Glens Falls NY 12801

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Purpose of Disbursement
Contribution

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
Scott Murphy

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2010
 Primary General
 Other (specify) ▼
Special General

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 3000.00 |
|---------|

TOTAL This Period (last page this line number only)

| |
|---------|
| 3000.00 |
|---------|