

**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) 1755 Jefferson Davis Highway
Suite 1107
Arlington VA 22202
Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00280321 3. IS THIS REPORT X 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) X 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 (M13)
(c) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
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 10 01 2001 through 10 31 2001

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 Mr. Joseph S. Littleton, III
Signature of Treasurer Electronically Filed by Mr. Joseph S. Littleton, III Date 11 14 2001

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
FMA Group Political Action Committee

Report Covering the Period: From: 10 01 2001 To: 10 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2001		13467.26
(b) Cash on Hand at Beginning of Reporting Period	6863.32	
(c) Total Receipts (from Line 19)	9382.66	121778.70
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	16245.98	135245.96
7. Total Disbursements (from Line 30)	9000.00	128000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7245.98	7245.96
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 800-420-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

PMA Group Political Action Committee

Report Covering the Period: From: ^{MM}10 ^{DD}01 ^{YYYY}2001 To: ^{MM}10 ^{DD}31 ^{YYYY}2001

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		
(i) Itemized (use Schedule A)	9382.66	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9382.66	121778.70
(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 32, page 4)	9382.66	121778.70
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 36, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	9382.66	121778.70
20. Total Federal Receipts (subtract Line 18 from Line 19)	9382.66	121778.70

DETAILED SUMMARY PAGE

of Disbursements

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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.....	9000.00	128000.00
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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	9000.00	128000.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	9000.00	128000.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	9382.66	121778.70
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	9382.66	121778.70
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	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 5 / 14	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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. Dan Cunningham

Mailing Address
7808 Creekside View Lane

City State Zip Code
Springfield VA 22153

Date of Receipt
N M / D E / Y Y Y Y
10 / 01 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 4000.00

Transaction ID: SA11A1.5930

Full Name (Last, First, Middle Initial)
B. Dan Cunningham

Mailing Address
7808 Creekside View Lane

City State Zip Code
Springfield VA 22153

Date of Receipt
N M / D E / Y Y Y Y
10 / 03 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 4500.00

Transaction ID: SA11A1.5936

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

Mailing Address
3086 Tudor Hall Road

City State Zip Code
Riva MD 21140-1324

Date of Receipt
N M / D E / Y Y Y Y
10 / 03 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 500.00

Transaction ID: SA11A1.5938

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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 6 / 14	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph S. Littleton, III

Mailing Address
10220 Grovewood Way

City State Zip Code
Fairfax VA 22032

Date of Receipt
N M / D E / Y Y Y Y
10 / 03 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 4000.00

Transaction ID: SA11A1.5940

B. Full Name (Last, First, Middle Initial)
John Lynch

Mailing Address
18719 Ostanbury Ct.

City State Zip Code
Dumfries VA 22026

Date of Receipt
N M / D E / Y Y Y Y
10 / 01 / 2001

Amount of Each Receipt this Period
416.66

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 3749.94

Transaction ID: SA11A1.5931

C. Full Name (Last, First, Middle Initial)
Brien Morgan

Mailing Address
8611 Mallard View

City State Zip Code
Fairfax Station VA 22039

Date of Receipt
N M / D E / Y Y Y Y
10 / 12 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 4466.66

Transaction ID: SA11A1.5941

SUBTOTAL of Receipts This Page (optional) ▶ **1416.66**

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: PAGE 7 / 14

(check only one)

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Rokala

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
10 01 2001

217 13th Street, SE

City State Zip Code

Washington DC 20003

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 416.00

Name of Employer Occupation
The PMA Group, Inc. Associate

Contribution

Receipt For: Aggregate Year-to-Date ▼

Primary General
Other (specify) ▼ 4162.10

Transaction ID: SA11A1.5932

Full Name (Last, First, Middle Initial)

B. Briggs Shada

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
10 12 2001

8920 Colesbury Place

City State Zip Code

Fairfax VA 22031

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 500.00

Name of Employer Occupation
The PMA Group, Inc. Associate

Contribution

Receipt For: Aggregate Year-to-Date ▼

Primary General
Other (specify) ▼ 3000.00

Transaction ID: SA11A1.5944

Full Name (Last, First, Middle Initial)

C. Kelli Short

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
10 03 2001

2400 Glebe Road Apt # 506

City State Zip Code

Arlington VA 22206

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 650.00

Name of Employer Occupation
The PMA Group, Inc. Associate

Contribution

Receipt For: Aggregate Year-to-Date ▼

Primary General
Other (specify) ▼ 3650.00

Transaction ID: SA11A1.5937

SUBTOTAL of Receipts This Page (optional) **1566.00**

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 8 / 14	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Charles Smith

Mailing Address
1050 North Taylor Street

City State Zip Code
Arlington VA 22201

Date of Receipt
N M / D E / Y Y Y Y
10 / 01 / 2001

Amount of Each Receipt this Period
3500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
Paul Magliocchetti Associates, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 4000.00

Transaction ID: SA11A1.5935

B. Full Name (Last, First, Middle Initial)
Brian Thiel

Mailing Address
12505 Lolly Post Lane

City State Zip Code
Woodbridge VA 22192

Date of Receipt
N M / D E / Y Y Y Y
10 / 12 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 2500.00

Transaction ID: SA11A1.5943

C. Full Name (Last, First, Middle Initial)
Mark Wackwold

Mailing Address
409 Colin Lane NW

City State Zip Code
Vienna VA 22180

Date of Receipt
N M / D E / Y Y Y Y
10 / 01 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
The PMA Group, Inc. Associate

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 4000.00

Transaction ID: SA11A1.5929

SUBTOTAL of Receipts This Page (optional) ▶ **4500.00**

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

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

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)
A. Glen Woods

Mailing Address
5602 Meridian Hill Place

City State Zip Code
Burke VA 22015

Date of Receipt
N M / D E / Y Y Y Y
10 / 12 / 2001

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period
400.00

Name of Employer The PMA Group, Inc.	Occupation Associate	Contribution
---	-------------------------	--------------

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2200.00

Transaction ID: SA11A1.5942

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	9382.66

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 14

<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				

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. ALAN MOLLOHAN FOR CONGRESS COMMITTEE		Date of Disbursement 10 / 24 / 2001
Mailing Address PO BOX 1343 City FAIRMONT State WV Zip Code 26555		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
		Transaction ID: SB23.5962

Full Name (Last, First, Middle Initial) B. BASS VICTORY 2000 COMMITTEE		Date of Disbursement 10 / 24 / 2001
Mailing Address PO BOX 3451 City CONCORD State NH Zip Code 03302		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
		Transaction ID: SB23.5960

Full Name (Last, First, Middle Initial) C. CAPUANO FOR CONGRESS COMMITTEE		Date of Disbursement 10 / 05 / 2001
Mailing Address PO BOX 440305 City SOMERVILLE State MA Zip Code 02144		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
		Transaction ID: SB23.5953

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
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 11 / 14

<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				

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. DIANE E WATSON FOR CONGRESS		Date of Disbursement 10 / 25 / 2001	
Mailing Address 601 S GLENOAKS BL #211 City BURBANK State CA Zip Code 91502		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
Transaction ID: SB23.5966			

Full Name (Last, First, Middle Initial) B. DOYLE FOR CONGRESS COMMITTEE		Date of Disbursement 10 / 05 / 2001	
Mailing Address 2227 HAMPTON STREET City PITTSBURCH State PA Zip Code 15218		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
Transaction ID: SB23.5950			

Full Name (Last, First, Middle Initial) C. FRIENDS OF HOUGHTON		Date of Disbursement 10 / 05 / 2001	
Mailing Address POST OFFICE BOX 1107 City CORNING State NY Zip Code 14830		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 31	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
Transaction ID: SB23.5955			

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
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 12 / 14

<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				

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. FRIENDS OF MAX CLELAND		Date of Disbursement 10 ^M / 17 ^D / 2001 ^Y	
Mailing Address 3146 NORTHEAST EXPRESSWAY P O BOX 7843 City State Zip Code ATLANTA GA 30341		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: GA District: 00		Transaction ID: SB23.595B	

Full Name (Last, First, Middle Initial) B. FRIENDS OF SENATOR CARL LEVIN		Date of Disbursement 10 ^M / 25 ^D / 2001 ^Y	
Mailing Address P O BOX 1857 City State Zip Code DETROIT MI 48231		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: MI District: 00		Transaction ID: SB23.597D	

Full Name (Last, First, Middle Initial) C. GALLEGLY FOR CONGRESS		Date of Disbursement 10 ^M / 05 ^D / 2001 ^Y	
Mailing Address PO BOX 940001 City State Zip Code SIMI VALLEY CA 93094		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: CA District: 23		Transaction ID: SB23.5951	

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
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 / 14

<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				

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. LANGEVIN FOR CONGRESS		Date of Disbursement 10 / 25 / 2001	
Mailing Address PO BOX 7888 City: WARWICK State: RI Zip Code: 02887		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
Transaction ID: SB23.5964			

Full Name (Last, First, Middle Initial) B. MIKE HONDA FOR CONGRESS		Date of Disbursement 10 / 05 / 2001	
Mailing Address 111 W ST JOHN STREET SUITE 400 City: SAN JOSE State: CA Zip Code: 95113		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 15	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
Transaction ID: SB23.5952			

Full Name (Last, First, Middle Initial) C. MISSOURIANS FOR KIT BOND		Date of Disbursement 10 / 09 / 2001	
Mailing Address 8229 CLAYTON ROAD SUITE 200 City: ST LOUIS State: MO Zip Code: 63117		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
Transaction ID: SB23.5956			

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
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				

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. MORAN FOR CONGRESS		Date of Disbursement 10 / 05 / 2001	
Mailing Address PO BOX 128 City: HAYS State: KS Zip Code: 67601		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01			
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Transaction ID: SB23.594B	

Full Name (Last, First, Middle Initial) B. STEVE ISRAEL FOR CONGRESS COMMITTEE		Date of Disbursement 10 / 25 / 2001	
Mailing Address 15 ORMOND STREET City: DIX HILLS State: NY Zip Code: 11748		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02			
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Transaction ID: SB23.596B	

Full Name (Last, First, Middle Initial) C. STUPAK FOR CONGRESS		Date of Disbursement 10 / 10 / 2001	
Mailing Address 817 8TH AVENUE PO BOX 143 City: MENOMINEE State: MI Zip Code: 49858		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01			
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Transaction ID: SB23.595B	

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	9000.00