

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

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) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of DC

5. Covering Period 10 16 2008 through 11 24 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 John Botts

Signature of Treasurer Electronically Filed by John Botts Date 01 30 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

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

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		258462.99
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	357789.74									
(c) Total Receipts (from Line 19)	91550.95	614066.40								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	449340.69	872529.39								
7. Total Disbursements (from Line 31)	461613.91	884802.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	-12273.22	-12273.22								
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

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

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	12830.00	157939.00
(i) Itemized (use Schedule A)	78310.00	451210.80
(ii) Unitemized	91140.00	609149.80
(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)	91140.00	609149.80
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.)	410.95	4916.60
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))	91550.95	614066.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	91550.95	614066.40

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.....	351363.91	497052.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	351363.91	497052.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	110000.00	382500.00
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	250.00	250.00
(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))	250.00	250.00
29. Other Disbursements.....	0.00	5000.00
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))..	461613.91	884802.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	461613.91	884802.61

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)	91140.00	609149.80
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90890.00	608899.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	351363.91	497052.61
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	351363.91	497052.61

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 33
(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)
NARAL Pro-Choice America

A. Full Name (Last, First, Middle Initial)
Betty Byrnes

Mailing Address 4901 Yerba Santa Drive

City State Zip Code
San Diego CA 92115-1039

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 8

Transaction ID: C5054863

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Steven Caplan

Mailing Address 435 E 79th St

City State Zip Code
New York NY 10075-1034

FEC ID number of contributing federal political committee. C

Name of Employer AI Friedman Occupation Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C5056314

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Carla Cassani

Mailing Address 800 Ringwood Ave

City State Zip Code
Menlo Park CA 94025-2238

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Physician

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

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: C5056132

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) 700.00

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 / 33
(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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
Lorna Cohen

Mailing Address 1360 Bluebird Canyon Drive

City State Zip Code
Laguna Beach CA 92651-3005

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: C5056940

Amount of Each Receipt this Period 270.00

B.

Full Name (Last, First, Middle Initial)
Robert G. Greenberg

Mailing Address 3015 Deer Meadow Dr

City State Zip Code
Danville CA 94506-2134

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: C5056962

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
Gloria Gularte

Mailing Address 6005 Cobblestone Dr

City State Zip Code
Ventura CA 93003-1223

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: C5055451

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1270.00

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 / 33

(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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
Edward Harris

Mailing Address 1130 Lake Shore Drive

City State Zip Code
Chicago IL 60611

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 ▼ 300.00

Date of Receipt MM / DD / YYYY
11 / 04 / 2008

Transaction ID: C5055805

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Janet R. Hofmann

Mailing Address 3889 Harvest Dr

City State Zip Code
Redwood City CA 94061-1142

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 ▼ 400.00

Date of Receipt MM / DD / YYYY
10 / 29 / 2008

Transaction ID: C5055822

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Janet R. Hofmann

Mailing Address 3889 Harvest Dr

City State Zip Code
Redwood City CA 94061-1142

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 ▼ 400.00

Date of Receipt MM / DD / YYYY
11 / 10 / 2008

Transaction ID: C5055821

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) 500.00

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 9 / 33

(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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
Angela Jolie

Mailing Address 464 30th St

City State Zip Code
San Francisco CA 94131-2307

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 510.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C5055341

Amount of Each Receipt this Period

255.00

B.

Full Name (Last, First, Middle Initial)
Paula Jones

Mailing Address 5 Bear Ridge Dr
Mr. Kevin Gough

City State Zip Code
Bloomfield CT 06002-1107

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

Name of Employer Information Requested Occupation Information Requested
Mass Mutral Secartary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: C5055859

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Diane Jorgenson

Mailing Address 212 Sunnybrook Dr

City State Zip Code
East Peoria IL 61611-3462

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

Name of Employer Information Requested Occupation Information Requested
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C5056269

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

610.00

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 10 / 33
(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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
Karen Pierce

Mailing Address 2634 N Dayton St

City State Zip Code
Chicago IL 60614-2306

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

Name of Employer Occupation
Self Employed Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2008

Transaction ID: C5056740

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Daniel Pitt

Mailing Address 234 Fulton Street

City State Zip Code
Palo Alto CA 94301-1321

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

Name of Employer Occupation
Santa Clara University Educator

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

Date of Receipt
MM / DD / YYYY
10 / 16 / 2008

Transaction ID: C5056937

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Lea Porter

Mailing Address 9280 Nightingale Dr

City State Zip Code
Los Angeles CA 90069-1118

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

Name of Employer Occupation
Coldwell Banker Real Estate

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2008

Transaction ID: C5055832

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ► 1850.00

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 11 / 33
(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

A. Full Name (Last, First, Middle Initial)
Helen Posey
 Mailing Address 2960 Jefferson St
 City Eugene State OR Zip Code 97405-2555
 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 ▼ 350.00
 Date of Receipt 10 / 21 / 2008
Transaction ID: C5056081
 Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Nancy Prescott
 Mailing Address PO Box 329
 City Keeseville State NY Zip Code 12944-0329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt 10 / 30 / 2008
Transaction ID: C5055891
 Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Angelica Rudenstine
 Mailing Address 41 Armour Rd
 City Princeton State NJ Zip Code 08540-3003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mellon Foundation Occupation Program Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 11 / 07 / 2008
Transaction ID: C5055918
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 650.00
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: (check only one)	PAGE 12 / 33
	<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)
NARAL Pro-Choice America

A. Full Name (Last, First, Middle Initial)
Janice Sakofsky

Mailing Address PO Box 10444

City Portland State OR Zip Code 97296-0444

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

Name of Employer Self Employed Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 20 / 2008

Transaction ID: C5057049

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Nancy Schwartz

Mailing Address 6491 82nd Pl

City Middle Village State NY Zip Code 11379-2340

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

Name of Employer New York University Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 03 / 2008

Transaction ID: C5055857

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Lynde B. Uihlein

Mailing Address 205 E. Wisconsin Avenue, #200
c/o Anne Summers

City Milwaukee State WI Zip Code 53202

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 20 / 2008

Transaction ID: C5057055

Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00

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 13 / 33
(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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
Helena Venero

Mailing Address 14840 Dade Pine Ave

City State Zip Code
Miami Lakes FL 33014-2622

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2008

Transaction ID: C5055958

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Virginia Watkin

Mailing Address 3001 Veazey Ter NW Apt 122

City State Zip Code
Washington DC 20008-5455

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2008

Transaction ID: C5055886

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Linda Wood

Mailing Address 900 Park Ln

City State Zip Code
Santa Barbara CA 93108-1422

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: C5056320

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	12830.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 33	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) Allfirst		Date of Receipt
Mailing Address PO Box 1596		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
City	State	Zip Code
Baltimore	MD	21203-1596
FEC ID number of contributing federal political committee.		Transaction ID: C5057080
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="410.95"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="4916.60"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="410.95"/>
TOTAL This Period (last page this line number only)	<input type="text" value="410.95"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Allfirst</p> <p>Mailing Address PO Box 1596</p> <p>City Baltimore State MD Zip Code 21203-1596</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: D239157 Date of Disbursement 11 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 698.96</p>
<p>B. Full Name (Last, First, Middle Initial) Direct Advantage Marketing</p> <p>Mailing Address 5601 Hobart St</p> <p>City Squirrel Hill State PA Zip Code 15217-2115</p> <p>Purpose of Disbursement Telemarketing Fundraising 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: D239125 Date of Disbursement 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 2893.32</p>
<p>C. Full Name (Last, First, Middle Initial) Donor Services Group</p> <p>Mailing Address 11500 West Olympic Boulevard Suite 540</p> <p>City Los Angeles State CA Zip Code 90064-1525</p> <p>Purpose of Disbursement Telemarketing 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: D239123 Date of Disbursement 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 27389.35</p>

SUBTOTAL of Disbursements This Page (optional) ▶

30981.63

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 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

A.	Full Name (Last, First, Middle Initial) Donor Services Group	Transaction ID: D239139 Date of Disbursement 11 / 17 / 2008
	Mailing Address 11500 West Olympic Boulevard Suite 540	Amount of Each Disbursement this Period 356.75
	City Los Angeles State CA Zip Code 90064-1525	
	Purpose of Disbursement Telemarketing for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dupli Envelope and Graphics	Transaction ID: D239122 Date of Disbursement 10 / 27 / 2008
	Mailing Address PO Box 11500	Amount of Each Disbursement this Period 517.59
	City Syracuse State NY Zip Code 13218	
	Purpose of Disbursement Printing for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Global Payment Solutions	Transaction ID: D239158 Date of Disbursement 11 / 24 / 2008
	Mailing Address 10705 Red Run Blvd	Amount of Each Disbursement this Period 1918.13
	City Owings Mills State MD Zip Code 21117-5134	
	Purpose of Disbursement Credit Card Processing Fees for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2792.47
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 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

A.	Full Name (Last, First, Middle Initial) Gordon Schwenkmeyer, Inc.	Transaction ID: D239127 Date of Disbursement MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 650 Howe Ave, Suite 600	Amount of Each Disbursement this Period 31894.38
	City Sacramento State CA Zip Code 95825	
	Purpose of Disbursement Telemarketing for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Greenberg Quinlan Rosner	Transaction ID: D239135 Date of Disbursement MM / DD / YYYY 11 / 05 / 2008
	Mailing Address 10 G Street, NE Suite 500	Amount of Each Disbursement this Period 28900.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Polling for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) LSG Strategies	Transaction ID: D239141 Date of Disbursement MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 2120 L St NW Ste 305	Amount of Each Disbursement this Period 11804.46
	City Washington State DC Zip Code 20037-1563	
	Purpose of Disbursement Telemarketing for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	72598.84
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 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

A.	Full Name (Last, First, Middle Initial) LSG Strategies	Transaction ID: D239142 Date of Disbursement 11 / 17 / 2008
	Mailing Address 2120 L St NW Ste 305	Amount of Each Disbursement this Period 11555.10
	City Washington State DC Zip Code 20037-1563	
	Purpose of Disbursement Telemarketing for PAC	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LSG Strategies	Transaction ID: D239121 Date of Disbursement 10 / 17 / 2008
	Mailing Address 2120 L St NW Ste 305	Amount of Each Disbursement this Period 50671.85
	City Washington State DC Zip Code 20037-1563	
	Purpose of Disbursement Telemarketing for PAC	003 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Meyer Telemarketing Services	Transaction ID: D239128 Date of Disbursement 11 / 04 / 2008
	Mailing Address 14 North Seventh Avenue	Amount of Each Disbursement this Period 32939.50
	City Saint Cloud State MN Zip Code 56303	
	Purpose of Disbursement Telemarketing for PAC	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	95166.45
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 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

A.	Full Name (Last, First, Middle Initial) Meyer Telemarketing Services Mailing Address 14 North Seventh Avenue City Saint Cloud State MN Zip Code 56303 Purpose of Disbursement Telemarketing for PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239144 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 6781.35 Category/ Type
B.	Full Name (Last, First, Middle Initial) Mission Control Mailing Address 201 Adams St City Manchester State CT Zip Code 06042-1985 Purpose of Disbursement Printing and Mailing for PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239120 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 117400.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Payment Solutions, Inc. Mailing Address PO Box 30217 City Bethesda State MD Zip Code 20824-0217 Purpose of Disbursement Credit Card Processing for PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239165 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 1115.44 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

125296.79

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 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

A.	Full Name (Last, First, Middle Initial) Share Group, Inc.	Transaction ID: D239162 Date of Disbursement 11 / 04 / 2008
	Mailing Address PO Box 55183	Amount of Each Disbursement this Period 14383.41
	City Boston State MA Zip Code 02205-5183	
	Purpose of Disbursement Telemarketing for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Stockton Incorporated	Transaction ID: D239132 Date of Disbursement 11 / 04 / 2008
	Mailing Address 7940 Cessna Ave	Amount of Each Disbursement this Period 1299.82
	City Gaithersburg State MD Zip Code 20879	
	Purpose of Disbursement Direct Mail for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Your Voice Media, Inc.	Transaction ID: D239134 Date of Disbursement 11 / 04 / 2008
	Mailing Address 685 Market Street, Suite 570	Amount of Each Disbursement this Period 8734.50
	City San Francisco State CA Zip Code 94105	
	Purpose of Disbursement Telemarketing for PAC	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	24417.73
TOTAL This Period (last page this line number only)	▶	351253.91

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)
NARAL Pro-Choice America

<p>A. Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS</p> <p>Mailing Address 14 KNIGHTSWOOD DRIVE</p> <p>City MARLTON State NJ Zip Code 08053</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name John H. Adler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ 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: D239090</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Al Franken for Senate</p> <p>Mailing Address PO Box 583144</p> <p>City Minneapolis State MN Zip Code 55458</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Al Franken</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D239094</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Alaskans for Begich</p> <p>Mailing Address PO BOX 240287</p> <p>City ANCHORAGE State AK Zip Code 99524</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mark Begich</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AK District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D239119</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)
NARAL Pro-Choice America

<p>A. Full Name (Last, First, Middle Initial) Andre Carson for Congress</p> <p>Mailing Address One North Capitol Street #211</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Andre Carson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D239106</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <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="1000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Barbara Lee for Congress</p> <p>Mailing Address 1736 FRANKLIN STREET #400</p> <p>City OAKLAND State CA Zip Code 94612</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Barbara Lee</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 09</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D239107</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <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="1000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) BOB LORD FOR CONGRESS</p> <p>Mailing Address 4340 E INDIAN SCHOOL SUITE 21-502</p> <p>City PHOENIX State AZ Zip Code 85018</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Bob Lord</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AZ 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: D239108</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <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="5000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7000.00"/>
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)
NARAL Pro-Choice America

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ALAN GRAYSON	Transaction ID: D239091
	Mailing Address P.O. BOX 532074	Date of Disbursement 10 / 17 / 2008
	City ORLANDO State FL Zip Code 32853	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Alan Grayson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	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) Crowley for Congress	Transaction ID: D239109
	Mailing Address 84-56 Grand Avenue	Date of Disbursement 10 / 27 / 2008
	City Elmhurst State NY Zip Code 11373	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Joseph Crowley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	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) Darcy Burner for Congress	Transaction ID: D239092
	Mailing Address PO Box 1090	Date of Disbursement 10 / 17 / 2008
	City Carnation State WA Zip Code 98014	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Darcy Burner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	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)	11000.00
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)
NARAL Pro-Choice America

<p>A. Full Name (Last, First, Middle Initial) HALVORSON FOR CONGRESS</p> <p>Mailing Address PO Box 176</p> <p>City State Zip Code Crete IL 60417</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Debbie Halvorson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 11</p>	<p>Transaction ID: D239093</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Franken Recount Fund</p> <p>Mailing Address 4190 VINEWOOD LANE #111-554</p> <p>City State Zip Code Minneapolis MN 55442</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Al Franken</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Recount</p>	<p>Transaction ID: D239154</p> <p>Date of Disbursement 11 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Barbara Boxer</p> <p>Mailing Address PO Box 641751</p> <p>City State Zip Code Los Angeles CA 90017</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Barbara Boxer</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Transaction ID: D239153</p> <p>Date of Disbursement 11 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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

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

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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)
NARAL Pro-Choice America

<p>A. Full Name (Last, First, Middle Initial) Giffords For Congress</p> <p>Mailing Address P.O. Box 27565</p> <p>City Tucson State AZ Zip Code 85726</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Gabrielle Giffords</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>Transaction ID: D239095</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Harry Mitchell For Congress</p> <p>Mailing Address P.O. Box 23748</p> <p>City Tempe State AZ Zip Code 85285</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Harry Mitchell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AZ District: 05</p>	<p>Transaction ID: D239096</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) HARRY TEAGUE FOR CONGRESS</p> <p>Mailing Address PO BOX 5153</p> <p>City HOBBS State NM Zip Code 88241</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Harry Teague</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NM District: 02</p>	<p>Transaction ID: D239110</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)
NARAL Pro-Choice America

A.

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

Transaction ID: D239111
Date of Disbursement

Mailing Address P.O. Box 317

/ /

City Amherst State NY Zip Code 14226

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Alice Kryzan

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 26

B.

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT LARRY JOE DOHERTY

Transaction ID: D239112
Date of Disbursement

Mailing Address 7670 WOODWAY SUITE 110

/ /

City HOUSTON State TX Zip Code 77063

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Larry Joe Doherty

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 10

C.

Full Name (Last, First, Middle Initial)
LINDA STENDER FOR CONGRESS

Transaction ID: D239099
Date of Disbursement

Mailing Address P.O. Box 730

/ /

City Scotch Plains State NJ Zip Code 07076

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Linda Stender

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 07

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)
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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)
NARAL Pro-Choice America

<p>A. Full Name (Last, First, Middle Initial) Madia for Congress</p> <p>Mailing Address P.O. Box 2459</p> <p>City Maple Grove State MN Zip Code 55311</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Ash Madia</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MN District: 03</p>	<p>Transaction ID: D239100</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Maloney for Congress</p> <p>Mailing Address 49 East 92nd Street</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Carolyn B. Maloney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 14</p>	<p>Transaction ID: D239113</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) MARTIN FOR SENATE INC</p> <p>Mailing Address PO BOX 7219</p> <p>City ATLANTA State GA Zip Code 30357</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Joan V. Martin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 00</p>	<p>Transaction ID: D239114</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)
NARAL Pro-Choice America

A. Full Name (Last, First, Middle Initial) MARTIN FOR SENATE INC <hr/> Mailing Address PO BOX 7219 <hr/> City ATLANTA State GA Zip Code 30357 <hr/> Purpose of Disbursement Contribution Candidate Name Joan V. Martin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	Transaction ID: D239148 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff
B. Full Name (Last, First, Middle Initial) MINNICK FOR CONGRESS <hr/> Mailing Address 7964 W Fairview Avenue <hr/> City Boise State ID Zip Code 83704 <hr/> Purpose of Disbursement Contribution Candidate Name Walt Minnick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239115 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 3500.00
	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) NICK LEIBHAM FOR CONGRESS <hr/> Mailing Address 425 W 5th Avenue Suite 205 <hr/> City Escondido State CA Zip Code 92025 <hr/> Purpose of Disbursement Contribution Candidate Name Nick Leibham Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239116 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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Detailed Summary Page

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(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)
NARAL Pro-Choice America

A.	Full Name (Last, First, Middle Initial) Nita Lowey for Congress	Transaction ID: D239117 Date of Disbursement 10 / 27 / 2008
	Mailing Address PO Box 271	Amount of Each Disbursement this Period 1000.00
	City White Plains State NY Zip Code 10605	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Nita M. Lowey	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Patrick Murphy for Congress	Transaction ID: D239101 Date of Disbursement 10 / 17 / 2008
	Mailing Address PO Box 868	Amount of Each Disbursement this Period 5000.00
	City Levittown State PA Zip Code 19058	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Patrick J. Murphy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAUL TONKO FOR CONGRESS	Transaction ID: D239103 Date of Disbursement 10 / 17 / 2008
	Mailing Address 911 Central Avenue PO Box 221	Amount of Each Disbursement this Period 1500.00
	City Albany State NY Zip Code 12206	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Paul Tonko	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21	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)
NARAL Pro-Choice America

A. Full Name (Last, First, Middle Initial)
Russ Carnahan for Congress Committee

Mailing Address 7370 Manchester Road
Suite 20

City State Zip Code
Saint Louis MO 63143

Purpose of Disbursement
Contribution

Candidate Name
Russ Carnahan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MO District: 03

Transaction ID: D239105

Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Tim Walz For US Congress

Mailing Address P.O. Box 938

City State Zip Code
Mankato MN 56002

Purpose of Disbursement
Contribution

Candidate Name
Tim Walz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MN District: 01

Transaction ID: D239118

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Udall for Colorado

Mailing Address PO Box 40158

City State Zip Code
Denver CO 80204

Purpose of Disbursement
Contribution

Candidate Name
Mark E. Udall

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 00

Transaction ID: D239160

Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

5000.00

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)
NARAL Pro-Choice America

A.	Full Name (Last, First, Middle Initial) UDALL FOR US ALL	Transaction ID: D239104 Date of Disbursement
	Mailing Address 3311 CANDELARIA NE SUITE A	<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City ALBUQUERQUE State NM Zip Code 87107	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Tom Udall	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	State: NM District: 00	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="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="11000.00"/>

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)

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<input 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 checked="" 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

A.	Full Name (Last, First, Middle Initial) Kristen Woll		Transaction ID: D239159	
	Mailing Address 58 W Clinton Avenue		Date of Disbursement 11 / 14 / 2008	
	City Irvington	State NY	Zip Code 10533-2130	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Refund		Category/ Type	
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	250.00