

# 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  
National Pro-Life Alliance PAC

ADDRESS (number and street) 4521 Windsor Arms CT  
 Check if different than previously reported. (ACC)  
Annandale VA 22003

2. **FEC IDENTIFICATION NUMBER** C00358051  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (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 04 01 2010 through 06 30 2010

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. Steve Antosh  
Signature of Treasurer Electronically Filed by Mr. Steve Antosh Date 07 14 2010

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  
National Pro-Life Alliance PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		137367.59
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	132367.59									
(c) Total Receipts (from Line 19) .....	40757.98	40757.98								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	173125.57	178125.57								
7. Total Disbursements (from Line 31) .....	14300.00	19300.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	158825.57	158825.57								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
National Pro-Life Alliance PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	3300.00	3300.00
(ii) Unitemized .....	37457.98	37457.98
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	40757.98	40757.98
(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) .....	40757.98	40757.98
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	40757.98	40757.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40757.98	40757.98

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	300.00	300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	300.00	300.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	19000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14300.00	19300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14300.00	19300.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	40757.98	40757.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40757.98	40757.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	300.00	300.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	300.00	300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 6 / 11
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeannette Breunig	Date of Receipt MM / DD / YYYY 05 / 05 / 2010
	Mailing Address 8667 County Road V	<b>Transaction ID:</b> SA11AI.22391
	City State Zip Code Sauk City WI 53583-9554	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) John A. DeMillia	Date of Receipt MM / DD / YYYY 04 / 22 / 2010
	Mailing Address 166 Dickinson Lane	<b>Transaction ID:</b> SA11AI.22379
	City State Zip Code Mahwah NJ 07430-3308	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Sean Dunagin	Date of Receipt MM / DD / YYYY 05 / 14 / 2010
	Mailing Address 107 Woodside Lane	<b>Transaction ID:</b> SA11AI.22385
	City State Zip Code Rogers AR 72756-0711	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Massco Dental President & Owner	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> 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 / 11
(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)  
National Pro-Life Alliance PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Gerald Faber		Date of Receipt	
	Mailing Address 4655 E 19th Crest		M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.22383
	Bellingham	WA	98226-7925	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
	Name of Employer Retired		Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Catherine M. Fasy		Date of Receipt	
	Mailing Address 728 Norristown Road Apt. G104		M M / D D / Y Y Y Y Y 0 5 / 0 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.22377
	Lower Gwynedd	PA	19002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
	Name of Employer Information requested		Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jean R. Maxey		Date of Receipt	
	Mailing Address 34034 Selva Road Unit 100		M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.22389
	Dana Point	CA	92629-3764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
	Name of Employer Information Requested		Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> 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 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)  
Daniel McMearty

Mailing Address 6500 River Hills Drive

City State Zip Code  
Harrisburg NC 28075-6619

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

Name of Employer Information requested Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** SA11AI.22381

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
James Sherman

Mailing Address 4 Tahoe Lane

City State Zip Code  
Sea Ranch Lakes FL 33308-2328

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

Name of Employer Occupation  
Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.22387

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**TOTAL** This Period (last page this line number only) ..... ► **3300.00**

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 11

<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)  
National Pro-Life Alliance PAC

A.

Full Name (Last, First, Middle Initial)  
Illinois State Board of Election

Mailing Address 1020 S. Spring St.

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Voter file

Candidate Name

005  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.22374

Date of Disbursement

06 / 29 / 2010

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) ▶

300.00

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

300.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)  
National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)  
COBURN FOR SENATE COMMITTEE

Mailing Address 3300 W OKMULGEE  
PO BOX 977

City MUSKOGEE State OK Zip Code 74401

Purpose of Disbursement

Category/  
Type

Candidate Name  
THOMAS A COBURN

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: OK District: 00

Transaction ID: SB23.22369  
Date of Disbursement

/

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MATT MILLER

Mailing Address 414 HILLCREST DRIVE

City ASHLAND State OH Zip Code 44805

Purpose of Disbursement

Category/  
Type

Candidate Name  
MATT MILLER

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: OH District: 16

Transaction ID: SB23.22358  
Date of Disbursement

/

Amount of Each Disbursement this Period

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

Mailing Address 100 POND SCHOOL ROAD

City SUSSEX State NJ Zip Code 07461

Purpose of Disbursement

Category/  
Type

Candidate Name  
SCOTT GARRETT

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: NJ District: 05

Transaction ID: SB23.22367  
Date of Disbursement

/

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) INGLIS FOR CONGRESS COMMITTEE INC.</p> <p>Mailing Address Post Office Box 361</p> <p>City Greenville State SC Zip Code 29602</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name ROBERT D INGLIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: SC District: 04</p>	<p><b>Transaction ID:</b> SB23.22372</p> <p>Date of Disbursement <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">26</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NEUGEBAUER CONGRESSIONAL COMMITTEE</p> <p>Mailing Address P.O. Box 54175</p> <p>City Lubbock State TX Zip Code 79453</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name RANDY NEUGEBAUER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TX District: 19</p>	<p><b>Transaction ID:</b> SB23.22368</p> <p>Date of Disbursement <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) RON HOOD FOR CONGRESS - CD18</p> <p>Mailing Address 14553 Walnut Creek Pike</p> <p>City Ashville State OH Zip Code 43103</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name RONALD E HOOD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 18</p>	<p><b>Transaction ID:</b> SB23.22353</p> <p>Date of Disbursement <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">19</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">5000.00</span></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="border: 1px solid black; padding: 2px; display: block;">7000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block;">14000.00</span>