

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 Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street) 2901 Telearstar Ct.
 Check if different than previously reported. (ACC)
Falls Church VA 22042

2. **FEC IDENTIFICATION NUMBER** C00005249
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 08 01 2008 through 08 31 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 Peter C. Brown

Signature of Treasurer Electronically Filed by Peter C. Brown Date 09 16 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

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		389938.49
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	313846.82									
(c) Total Receipts (from Line 19)	89741.49	639696.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	403588.31	1029634.52								
7. Total Disbursements (from Line 31)	147438.80	773485.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	256149.51	256149.51								
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)	14215.25									

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

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

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	34998.98	183774.49
(i) Itemized (use Schedule A)		
(ii) Unitemized	54742.51	455921.54
(iii) TOTAL (add Lines 11(a)(i) and (ii)	89741.49	639696.03
(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)	89741.49	639696.03
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))	89741.49	639696.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	89741.49	639696.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	25438.80	149984.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	25438.80	149984.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	122000.00	622700.00
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	800.50
(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	800.50
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))..	147438.80	773485.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	147438.80	773485.01

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	89741.49	639696.03
34. Total Contribution Refunds (from Line 28(d))	0.00	800.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	89741.49	638895.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	25438.80	149984.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25438.80	149984.51

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 6 / 134
	<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	

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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Matthew S. Tassey	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 5 Reggio Ave.	Transaction ID: 7128555
	City State Zip Code Old Orchard Beach ME 04064-2709	Amount of Each Receipt this Period 72.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Burwell & Burwell Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

B.	Full Name (Last, First, Middle Initial) Mr. Raymond M. White	Date of Receipt MM / DD / YYYY 08 / 26 / 2008
	Mailing Address 24 Reverend Houston Drive	Transaction ID: 7128557
	City State Zip Code Bedford NH 03110-5023	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cornerstone Benefit & Retirement Grou President/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Peter Fulchiron	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 411 San Andreas Drive	Transaction ID: 7128581
	City State Zip Code Novato CA 94945-1237	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Allstate Life Ins. Co./IL Agency Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	372.00
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 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Neil M. Cubberley

Mailing Address P.O. BOX 5109

City State Zip Code
SEVIERVILLE TN 37864-5109

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Cubberley Agency OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7128583

Amount of Each Receipt this Period 27.50

B. Full Name (Last, First, Middle Initial)
Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City State Zip Code
Muncy PA 17756-5789

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Kent A. Bennett & Assoc., Inc. General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.00

Date of Receipt MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7128591

Amount of Each Receipt this Period 87.50

C. Full Name (Last, First, Middle Initial)
Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City State Zip Code
Landenberg PA 19350

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Edward A. Zabielski Jr & Co. President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7128607

Amount of Each Receipt this Period 105.00

SUBTOTAL of Receipts This Page (optional) 220.00

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 8 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. James W. Monteverde	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address WaterWorks Road	Transaction ID: 7128609
	City State Zip Code Sewickley PA 15143	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Monteverde Group, LLC President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Ms. Laurene B. Prevette	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 741 Romany Road	Transaction ID: 7128627
	City State Zip Code Charlotte NC 28203-4849	Amount of Each Receipt this Period 27.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Equity Brokerage, Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mr. Glenford B. Malcolm, Sr.	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address P. O. Box 822315	Transaction ID: 7128635
	City State Zip Code South Florida FL 33082-2315	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Monumental Life Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

SUBTOTAL of Receipts This Page (optional)	119.50
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 9 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Angelo T. Stath	Date of Receipt
	Mailing Address 7821 Massachusetts	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 10 / 2008
	City State Zip Code Merrville IN 46410-5531	Transaction ID: 7128653
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period <input type="text"/> 50.00
	Name of Employer: Angelo T. Stath Ins. & Finance Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) Mr. David A. Culley	Date of Receipt
	Mailing Address 4187 Club Drive N.E.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 10 / 2008
	City State Zip Code Atlanta GA 30319-1115	Transaction ID: 7128661
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period <input type="text"/> 42.00
	Name of Employer: Nease, Lagana, Eden & Culley Inc Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 336.00	

C.	Full Name (Last, First, Middle Initial) Mr. Lawrence E. Lounds	Date of Receipt
	Mailing Address 2477 Valley Oaks Circle	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 10 / 2008
	City State Zip Code Flint MI 48532	Transaction ID: 7128665
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period <input type="text"/> 105.00
	Name of Employer: Security 1st Benefits Corp. Occupation: President/Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 840.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 197.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 10 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. C. Gibbs Smith, Jr.		Date of Receipt MM / DD / YYYY 08 / 04 / 2008		
	Mailing Address 2028 Priest Rd		Transaction ID: 7128691		
	City Nashville	State TN	Zip Code 37215-5116	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Benefit Programs Inc.	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Mr. T. Leslie Littleton		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 1025 E. Austin		Transaction ID: 7128721		
	City Nacogdoches	State TX	Zip Code 75965-2964	Amount of Each Receipt this Period 52.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Ins. Co	Occupation PRINCIPAL			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 415.00			

C.	Full Name (Last, First, Middle Initial) Mr. Robert M. Nelson		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 14712 Shirley Street		Transaction ID: 7128727		
	City Omaha	State NE	Zip Code 68144-2144	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Grace-Mayer Ins. Agency	Occupation Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional)	▶	602.50
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 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Carl James Maus

Mailing Address 432 Fort Saratoga

City State Zip Code
Saint Charles MO 63303-1766

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

Name of Employer Insurance and Investment Services
Occupation Career Development Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
463.20

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7128731

Amount of Each Receipt this Period
50.40

B.

Full Name (Last, First, Middle Initial)
Mr. Leslie W. Lee

Mailing Address 7522 E Hampstead Ct.

City State Zip Code
Middleton WI 53562-3609

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

Name of Employer Farmer Financial Services
Occupation Trainor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7128735

Amount of Each Receipt this Period
25.20

C.

Full Name (Last, First, Middle Initial)
Mr. David A. Middaugh

Mailing Address 3273 Evergreen Road

City State Zip Code
Fargo ND 58102-1214

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

Name of Employer Middaugh & Associates, Inc.
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1008.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7128737

Amount of Each Receipt this Period
126.00

SUBTOTAL of Receipts This Page (optional) ► **201.60**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John R. Dean

Mailing Address 1700 S.W. 15th Ave.

City Willmar State MN Zip Code 56201

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

Name of Employer Affiliated Financial Services Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128747
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard L. Hill

Mailing Address 2611 Alvo Road

City Seward State NE Zip Code 68434

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

Name of Employer Unico Financial Services, Inc. Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128751
 Amount of Each Receipt this Period: 42.00

C. Full Name (Last, First, Middle Initial)
Ms. Kelli J. Carmichael

Mailing Address 2914 S Coffman

City Casper State WY Zip Code 82604-4733

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

Name of Employer Lincoln Financial Advisors Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128755
 Amount of Each Receipt this Period: 22.50

SUBTOTAL of Receipts This Page (optional) ► **114.50**

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 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. William N. Haraway

Mailing Address 113 Fairview Ave

City State Zip Code
Frederick MD 21701-4017

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

Name of Employer Haraway Financial Services Occupation Financial Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7128765

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Don E. McKinley

Mailing Address 21 Ridgetop

City State Zip Code
St Louis MO 63117-1021

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

Name of Employer McKinley Financial Resources Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: 7128773

Amount of Each Receipt this Period
120.00

C.

Full Name (Last, First, Middle Initial)
Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City State Zip Code
Carmichael CA 95608

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

Name of Employer NAIFA-California Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7128777

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **204.00**

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 14 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Brian R. Phares

Mailing Address 1420 Hackberry Road

City State Zip Code
North Platte NE 69101-6841

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

Name of Employer: Phares Financial Services Occupation: Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128779
Amount of Each Receipt this Period: 62.50

B. Full Name (Last, First, Middle Initial)
Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City State Zip Code
Los Altos CA 94022-2354

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

Name of Employer: The Vita Companies Occupation: Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128785
Amount of Each Receipt this Period: 42.50

C. Full Name (Last, First, Middle Initial)
Mr. Karl Erik Hansen

Mailing Address 900 North Shoreline Boulevard

City State Zip Code
Mountain View CA 94043-1933

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

Name of Employer: The Vita Companies Occupation: Brokerage Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128805
Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► 147.50

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Johnny Jon Johnson

Mailing Address 3770 N Frandon Avenue

City State Zip Code
Meridian ID 83646

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

Name of Employer Regence BlueShield of Idaho Occupation Boise District Sales Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128819
Amount of Each Receipt this Period: 27.00

B. Full Name (Last, First, Middle Initial)
Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City State Zip Code
Tupelo MS 38801

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

Name of Employer United American Insurance Co. Occupation Branch Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128829
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark R. Warren

Mailing Address 3603 Grandview

City State Zip Code
Plainview TX 79072-6625

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

Name of Employer Warren Insurance Services Occupation MANAGER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7128833
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 127.00

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 16 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Laster

Mailing Address 1713 Elmhurst Ave

City State Zip Code
Nichols Hills OK 73120

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

Name of Employer Rogers Benefit Group Occupation Regional Representative

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

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

Transaction ID: 7128859

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. Alex Hanson

Mailing Address 7888 Glen Finnan Cir

City State Zip Code
Ft Myers FL 33912

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

Name of Employer Dawson Companies Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7128875

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. Hollis O. Inglett, Jr.

Mailing Address 31 Cone Rd

City State Zip Code
Ormond Beach FL 32174-7903

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

Name of Employer Hayward Brown Inc. Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7128877

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **134.40**

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 17 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Frank R. Nolimal

Mailing Address 2017 Grafton Ave

City State Zip Code
Henderson NV 89014

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

Name of Employer Occupation
Assurance Ltd Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

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

Transaction ID: 7128931

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)
Mr. Henry L Prien

Mailing Address 415 38th St S Ste E

City State Zip Code
Fargo ND 58103-1190

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

Name of Employer Occupation
American Family Life Insurance Co. District Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 403.20

Date of Receipt

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

Transaction ID: 7128975

Amount of Each Receipt this Period

50.40

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth H. Pendley

Mailing Address 722 Kenwood Rd

City State Zip Code
Fayetteville GA 30214-3391

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

Name of Employer Occupation
Ohio National Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: 7128987

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ▶

410.40

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 18 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Robert E. Dooley

Mailing Address 1567 Edmond Drive

City State Zip Code
San Carlos CA 94070-4235

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

Name of Employer Dooley Insurance & Financial Services
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	8

Transaction ID: 7129003

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Scholz

Mailing Address 1510 So. 183 Circle

City State Zip Code
Omaha NE 68130

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

Name of Employer Ameritas Life Insurance Corp
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
980.00

Date of Receipt

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

Transaction ID: 7129055

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul R. Decker

Mailing Address Box 1832

City State Zip Code
Idaho Falls ID 83403-1832

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

Name of Employer Beneficial Life
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.20

Date of Receipt

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

Transaction ID: 7129067

Amount of Each Receipt this Period
50.40

SUBTOTAL of Receipts This Page (optional) ► **675.40**

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 19 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. S. Mark Weeks	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 1389 South 500 East	Transaction ID: 7129071
	City State Zip Code Salt Lake City UT 84105-2043	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
Name of Employer Bankers Life & Casualty Co.	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

B.	Full Name (Last, First, Middle Initial) Ms. Donna J. Burrill	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address P.O.BOX 143	Transaction ID: 7129073
	City State Zip Code FORT COLLINS CO 80522-0143	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Burrill Financial Service	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jeff L. Holland	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 200 Matthew Drive	Transaction ID: 7129087
	City State Zip Code Paducah KY 42001-6162	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer HollandStivers & Assoc., LLC	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	102.50
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 20 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Raymond H. Moran

Mailing Address 5463 Irvin Park Cove

City State Zip Code
Memphis TN 38119

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

Name of Employer Occupation
The Moran Company General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129095

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Mr. Roy W. Kern

Mailing Address 3775 West Randall Road

City State Zip Code
Springfield MO 65810

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

Name of Employer Occupation
Roy W. Kern & Associate OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129105

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronald D. Brant

Mailing Address 10234 Hoffman

City State Zip Code
Maybee MI 48159-9777

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

Name of Employer Occupation
Lincoln Financial Network AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1664.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129109

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John M. Root

Mailing Address 1759 NW Riverview Dr

City State Zip Code
Roseburg OR 97470-6104

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

Name of Employer Bill Moats and Associates Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2008

Transaction ID: 7129117

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank H. Briggs, Jr.

Mailing Address 2610 Bohler Rd NW

City State Zip Code
Atlanta GA 30327-1418

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

Name of Employer Briggs & Associates/AXA Advisors, LLC Occupation Financial Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129159

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Roger G. Taylor

Mailing Address 3622 Wind Briar Ct.

City State Zip Code
Battleboro NC 27809

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

Name of Employer Roger G. Taylor & Associates Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2008

Transaction ID: 7129165

Amount of Each Receipt this Period
2750.00

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Walter C. Sprye, Jr.
Mailing Address 101 Stoney Brook Rd.
City State Zip Code
Rocky Mount NC 27804
FEC ID number of contributing federal political committee. **C**
Name of Employer AXA Advisors, LLC Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 369.60
Date of Receipt 08 / 10 / 2008
Transaction ID: 7129175
Amount of Each Receipt this Period 46.20

B. Full Name (Last, First, Middle Initial)
Mrs. Lynda D. Turner
Mailing Address 1070 S Bosque Loop
City State Zip Code
Bosque Farms NM 87068-9063
FEC ID number of contributing federal political committee. **C**
Name of Employer AXA Advisors, LLC Occupation AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 08 / 10 / 2008
Transaction ID: 7129189
Amount of Each Receipt this Period 45.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert B. Joki
Mailing Address 18612 64th PI NE
City State Zip Code
Kenmore WA 98028-7917
FEC ID number of contributing federal political committee. **C**
Name of Employer Robert B. Joki & Associates Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 08 / 29 / 2008
Transaction ID: 7129199
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ▶ 241.20
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Elwood B. Syverson

Mailing Address 509 Loomis Drive

City State Zip Code
Mauston WI 53948-1522

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

Name of Employer The Rural Insurance Co's Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

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

Transaction ID: 7129215

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)
Mr. William J. Lynch

Mailing Address 5075 SW Griffith Dr. #200

City State Zip Code
Beaverton OR 97005

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

Name of Employer Farmers Insurance Occupation General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 337.50

Date of Receipt

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

Transaction ID: 7129227

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
Ms. Shelly D. Pensky

Mailing Address 2855 S. 4th Avenue #118

City State Zip Code
Yuma AZ 85364-8150

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

Name of Employer Farmers Insurance Group Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

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

Transaction ID: 7129241

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ►

110.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 134
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. H. Keith de Noble

Mailing Address 36308 Highway 300

City State Zip Code
Bigelow AR 72016

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

Name of Employer: H. Keith de Noble Ins. Agency, Inc. Occupation: Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7129255
Amount of Each Receipt this Period: 36.00

B. Full Name (Last, First, Middle Initial)
Mr. Steven M. Daniel

Mailing Address 2600 Meadowbrook Dr

City State Zip Code
Butte MT 59701-4028

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

Name of Employer: Daniel Financial Services, Inc. Occupation: President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7129287
Amount of Each Receipt this Period: 25.20

C. Full Name (Last, First, Middle Initial)
Mr. Randall C. Wimsatt

Mailing Address 2460 E 20th St

City State Zip Code
Farmington NM 87401-4402

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

Name of Employer: ING Financial Partners Occupation: District Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7129295
Amount of Each Receipt this Period: 25.20

SUBTOTAL of Receipts This Page (optional) ► 86.40

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 25 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln.
P.O. Box 2433

City State Zip Code
Cody WY 82414-2433

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

Name of Employer Taggart Company Occupation General Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7129329
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. George C. Kosmos, Jr.

Mailing Address The Highlands

City State Zip Code
Seattle WA 98177

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

Name of Employer CSM Pacific, Inc. Occupation President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 14 / 2008
Transaction ID: 7129331
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas M. Hawco

Mailing Address 1425 Smith St

City State Zip Code
Lincoln NE 68502-3653

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

Name of Employer Occupation Agency Owner

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7129349
Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► 342.50

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 26 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Carol A. Anderson
 Mailing Address 717 N. 87th St.
 City State Zip Code
 Omaha NE 68114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sharp Anderson Arena Curnes & Assoc
 Occupation Representative
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 0 / 2 0 0 8
Transaction ID: 7129361
 Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert B. Anderson
 Mailing Address 1456 Old Boones Creek Road
 City State Zip Code
 Jonesborough TN 37659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tennessee Financial
 Occupation Division Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 0 / 2 0 0 8
Transaction ID: 7129365
 Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Anthony J. Domino, Jr.
 Mailing Address 83 Long Lots Rd
 City State Zip Code
 New Canaan CT 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Associated Benefit Consultants, LLC
 Occupation President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 9 / 2 0 0 8
Transaction ID: 7129377
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**
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 27 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Vincent M. D'Addona

Mailing Address 141 Greenway Road

City State Zip Code
Lido Beach NY 11561-4828

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

Name of Employer
D'Addona Rosenbaum

Occupation
General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
735.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129381

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Mark V. Snider

Mailing Address 44 Elmwood Place

City State Zip Code
Athens OH 45701-1904

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

Name of Employer
Snider, Fuller & Associates

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129383

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City State Zip Code
New York NY 10014-7200

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

Name of Employer
Weiser Capital Management LLC

Occupation
Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129393

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **189.00**

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 28 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Lanny D. Levin

Mailing Address 313 Laurel

City Highland Park State IL Zip Code 60035-2619

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

Name of Employer Lanny D. Levin Agency, In-c. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7129407

Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Mr. William R. Sapers

Mailing Address 10 Rows Wharf #1201

City Boston State MA Zip Code 02110-3317

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

Name of Employer Sapers & Wallack Insurance Agency Inc Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2008

Transaction ID: 7129409

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Ms. Aviva E. Sapers

Mailing Address 275 Washington Street, Suite 205

City Cambridge State MA Zip Code 02458

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

Name of Employer Sapers & Wallack Ins. Agency Inc Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 29 / 2008

Transaction ID: 7129411

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **542.00**

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 29 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Stephen G. Summerlin

Mailing Address 4014 N. W. 15th Street

City State Zip Code
Gainesville FL 32605-1912

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

Name of Employer Occupation
Summerlin Financial Advisors, Inc. Certified Financial Planner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 336.00

Date of Receipt

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

Transaction ID: 7129415

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Norman A. Coltrane

Mailing Address 1607 Hatherleigh Drive

City State Zip Code
Fayetteville NC 28304-3643

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

Name of Employer Occupation
Callahan & Rice Life Specialist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 539.00

Date of Receipt

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

Transaction ID: 7129423

Amount of Each Receipt this Period

60.50

C.

Full Name (Last, First, Middle Initial)
Mr. Douglas B. Massey

Mailing Address 3115 Southwest Blvd.

City State Zip Code
San Angelo TX 76904-5772

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

Name of Employer Occupation
Doug Massey Financial Services Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt

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

Transaction ID: 7129439

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

145.00

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 30 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Ronald G. Hester

Mailing Address 261 New River Heights Rd.

City State Zip Code
Boone NC 28607

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

Name of Employer Occupation
Lincoln Financial Network Division Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 374.00

Date of Receipt

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

Transaction ID: 7129441

Amount of Each Receipt this Period

46.75

B.

Full Name (Last, First, Middle Initial)
Mr. William V. Irons

Mailing Address 150 Prospect Rd

City State Zip Code
Wakefield RI 02879-7044

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

Name of Employer Occupation
Irons & Associates President/Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.60

Date of Receipt

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

Transaction ID: 7129443

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Lee Harlow

Mailing Address 12250 Angel Wing Ct

City State Zip Code
Reston VA 20191-1102

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

Name of Employer Occupation
The Harlow Group, LLC Managing Partner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

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

Transaction ID: 7129461

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

113.95

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 31 / 134		
	<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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Paul Terkeltaub		Date of Receipt MM / DD / YYYY 08 / 29 / 2008		
	Mailing Address 4409 Moosewood Drive		Transaction ID: 7129463		
	City Virginia Beach	State VA	Zip Code 23462-5720	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer The Frieden Agency Inc.	Occupation Sales Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Barton C. Pasco		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 309 Running Cedar Lane		Transaction ID: 7129469		
	City Richmond	State VA	Zip Code 23229-7953	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pasco Financial Group, LLC	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 452.50			

C.	Full Name (Last, First, Middle Initial) Mr. Marcus T. Henderson, Sr.		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 109 Barrington Court East		Transaction ID: 7129473		
	City Franklin	State TN	Zip Code 37067	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Henderson Financial Group, Inc.	Occupation President & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 336.00			

SUBTOTAL of Receipts This Page (optional)	▶	342.00
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 32 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Gary A. Bramon

Mailing Address 269 San Felipe Way

City State Zip Code
Novato CA 94945-1687

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

Name of Employer Occupation
Alders Financial Solutions General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129481

Amount of Each Receipt this Period
50.00

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

Mailing Address 16932 SW 5th Way

City State Zip Code
Weston FL 33326-1564

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

Name of Employer Occupation
Montefel Inc. General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.50

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129537

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Lance B. Kolbet

Mailing Address 4632 Mountain Park Rd.

City State Zip Code
Pocatello ID 83202-1702

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

Name of Employer Occupation
University Financial Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129543

Amount of Each Receipt this Period
126.00

SUBTOTAL of Receipts This Page (optional) ► 226.00

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 33 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. George B. Bryce

Mailing Address 2730 Ardon Ln

City State Zip Code
Casper WY 82609-3902

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

Name of Employer The Insurance Agency Occupation General Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7129563

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald C. Jayne

Mailing Address 20402 Tulsa Street

City State Zip Code
Chatsworth CA 91311-1723

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

Name of Employer Executive Financial Systems Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

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

Transaction ID: 7129610

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. David Burstin

Mailing Address 1435 Bennington Avenue

City State Zip Code
Pittsburgh PA 15217-1138

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

Name of Employer Brand, Burstin, Runnette Occupation General Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 7129616

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **334.00**

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 34 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James E. Freilinger

Mailing Address 24 Teal Point Dr

City Scarborough State ME Zip Code 04074

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

Name of Employer James E Freilinger Co Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 22 / 2008

Transaction ID: 7129657

Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael O. Brown

Mailing Address 6512 Nell 3

City Edmond State OK Zip Code 73013

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

Name of Employer MassMutual Financial Group Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7129661

Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
Mr. Scott R. Bunkers

Mailing Address 1320 Magnolia Bay Ct.

City Maitland State FL Zip Code 32751-6472

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

Name of Employer Insurance Consultants Central FL Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2008

Transaction ID: 7129679

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **710.00**

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 35 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Charles W. Potts

Mailing Address 12725 St. Andrews Ter

City State Zip Code
Oklahoma City OK 73120-8807

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

Name of Employer Occupation
MassMutual Financial Group Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129687

Amount of Each Receipt this Period
36.00

B.

Full Name (Last, First, Middle Initial)
Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City State Zip Code
Boise ID 83706-5095

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

Name of Employer Occupation
Erstad & Company General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129691

Amount of Each Receipt this Period
50.40

C.

Full Name (Last, First, Middle Initial)
Mr. Jules O. Gaudreau, Jr.

Mailing Address 23 Briarcliff Drive

City State Zip Code
Wilbraham MA 01095-2614

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

Name of Employer Occupation
The Gaudreau Group, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2008

Transaction ID: 7129717

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **586.40**

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 36 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joel K. Williamson

Mailing Address 1750 Cord 16

City State Zip Code
Tulia TX 79088

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

Name of Employer Occupation
Financial Solutions Financial Solutions

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

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

Transaction ID: 7129775

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth E. Knox

Mailing Address Unit 9, 10 East St

City State Zip Code
Providence RI 02906-3069

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

Name of Employer Occupation
Penn Mutual Regional Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 403.20

Date of Receipt

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

Transaction ID: 7129805

Amount of Each Receipt this Period

50.40

C.

Full Name (Last, First, Middle Initial)

Mr. Darren Scott Mason

Mailing Address 178 Shorecliff Rd

City State Zip Code
Corona Del Mar CA 92625-2648

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

Name of Employer Occupation
Advanced Benefit Systems General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 333.28

Date of Receipt

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

Transaction ID: 7129819

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)

122.06

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 37 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Debbie K. Paul

Mailing Address 4001 MacArthur Blvd Suite 300

City State Zip Code
Newport Beach CA 92660-2510

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

Name of Employer Occupation
Securian Financial Network Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

Transaction ID: 7129829

Amount of Each Receipt this Period
42.50

B. Full Name (Last, First, Middle Initial)
Mr. James O. Geitgey

Mailing Address 279 Glenmore Dr.

City State Zip Code
Springfield OH 45503

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

Name of Employer Occupation
Geitgey Financial Services President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

Transaction ID: 7129833

Amount of Each Receipt this Period
42.50

C. Full Name (Last, First, Middle Initial)
Mr. Richard D. Vonderlage

Mailing Address 15202 Sprague St

City State Zip Code
Omaha NE 68116

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

Name of Employer Occupation
Heritage Financial Svcs. Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7129881

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **127.00**

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 38 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. John C. Beckwith

Mailing Address 1908 Greenbriar Drive

City State Zip Code
Portage MI 49024-5787

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

Name of Employer Occupation
Ohio National Fin. Services General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129895

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lawrence J. Fowler, Jr.

Mailing Address 481 Route 82

City State Zip Code
Oakdale CT 06370-1149

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

Name of Employer Occupation
Nationwide Insurance Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2008

Transaction ID: 7129903

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Douglas F. Bennetti

Mailing Address 806 Quail Run

City State Zip Code
Wyoming DE 19934

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

Name of Employer Occupation
Nationwide Insurance Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2008

Transaction ID: 7129905

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ▶ **467.00**

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 39 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. David S. Dickenson, II

Mailing Address 7535 Brigham Road

City State Zip Code
Gates Mills OH 44040

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

Name of Employer Occupation
Dickenson & Associates General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129931

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Mr. H. Larry Fortenberry

Mailing Address 123 Northshore Pt

City State Zip Code
Madison MS 39110-7272

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

Name of Employer Occupation
Executive Planning Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129945

Amount of Each Receipt this Period
52.50

C. Full Name (Last, First, Middle Initial)
Mr. Douglas E. Aycock

Mailing Address 5113 Southwest Pkwy # 200

City State Zip Code
Austin TX 78735-8915

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

Name of Employer Occupation
Aycock Financial Group Employee Benefit Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7129949

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **137.00**

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 40 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. M. Jay Einstein	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 59 Margarete Dr.	Transaction ID: 7129979
	City State Zip Code Pittsgrove NJ 08318-3015	Amount of Each Receipt this Period 72.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation New York Life General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

B.	Full Name (Last, First, Middle Initial) Mr. Arthur Ivan Swanson	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 2270 E. 24TH PL	Transaction ID: 7129981
	City State Zip Code Yuma AZ 85365-3245	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation New York Life Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.60	

C.	Full Name (Last, First, Middle Initial) Mr. Thomas F. Flournoy, Jr.	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 5300 Zebulon Rd	Transaction ID: 7130003
	City State Zip Code Macon GA 31210-2199	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation New York Life General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

SUBTOTAL of Receipts This Page (optional)	▶	139.20
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 41 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Dennis A. Brumbaugh

Mailing Address 17 Conley Lane

City State Zip Code
Elma WA 98541

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

Name of Employer Occupation
Brumbaugh Insurance Services AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt

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

Transaction ID: 7130095

Amount of Each Receipt this Period
42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Gordon T. Colburn

Mailing Address 126 Crystal Springs Road

City State Zip Code
San Dimas CA 91773

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

Name of Employer Occupation
Colburn Ins. Services, Inc. President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt

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

Transaction ID: 7130113

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)

Mr. Angelo Assad Haddad

Mailing Address 354 Garnsey Ave

City State Zip Code
Bakersfield CA 93309-1849

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

Name of Employer Occupation
New York Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt

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

Transaction ID: 7130123

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ▶

127.50

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 42 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Aldous Kawaiiani Paalani

Mailing Address 2219 Kaululaau Street

City Honolulu State HI Zip Code 96813-1230

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

Name of Employer: Equity Insurance Services, Inc. Occupation: Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 08 / 10 / 2008

Transaction ID: 7130139

Amount of Each Receipt this Period: 62.50

B. Full Name (Last, First, Middle Initial)
Mr. Ken Simons

Mailing Address 808 Thoroughbred Lane

City Artesia State NM Zip Code 88210-2232

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

Name of Employer: New York Life Insurance Occupation: General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.80

Date of Receipt: 08 / 10 / 2008

Transaction ID: 7130141

Amount of Each Receipt this Period: 50.10

C. Full Name (Last, First, Middle Initial)
Mr. John W. Collier

Mailing Address 4600 Kietzke Lane, #134-D

City Reno State NV Zip Code 89502

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

Name of Employer: American General Financial Group Occupation: General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 08 / 10 / 2008

Transaction ID: 7130153

Amount of Each Receipt this Period: 50.40

SUBTOTAL of Receipts This Page (optional) ► **163.00**

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 43 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Anthony D. Miller

Mailing Address 4502 Hi-Line Dr

City State Zip Code
Billings MT 59106

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

Name of Employer Retirement Solutions Occupation Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

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

Transaction ID: 7130165

Amount of Each Receipt this Period
50.40

B.

Full Name (Last, First, Middle Initial)
Mr. Robert M. Roach

Mailing Address 2815 Ridgeway Ave NW #1

City State Zip Code
Columbus OH 43215

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

Name of Employer NMFN - Kemelgor Fin. Group Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 7130209

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Mr. Charles D. Zaleski, CLU, ChFC

Mailing Address 28400 Ridgethorne Ct

City State Zip Code
Rancho Palos Verde CA 90275-3258

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

Name of Employer Zaleski Ins Svcs Inc Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7130215

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **217.40**

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 44 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard A. Koob

Mailing Address 301 Frederick Street

City State Zip Code
Waukesha WI 53186-8116

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

Name of Employer Occupation
The Holter Financial Group Financial Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 403.20

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

Transaction ID: 7130225

Amount of Each Receipt this Period
50.40

B.

Full Name (Last, First, Middle Initial)
Mr. Charles E. Jackson, Jr.

Mailing Address 53 Jordan Lane

City State Zip Code
Mobile AL 36608-2624

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

Name of Employer Occupation
McNeil, Jackson, Ahrens Financial Grou Financial Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 318.50

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

Transaction ID: 7130235

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Ms. Laura P. DeGolier

Mailing Address 114 S. Main Street
PMB 301

City State Zip Code
Fond Du Lac WI 54935-4229

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

Name of Employer Occupation
DeGolier Insurance Services, LLC OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.60

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

Transaction ID: 7130243

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **118.10**

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 45 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James A. Buchan

Mailing Address 5716 W. Orlando Circle

City State Zip Code
Broken Arrow OK 74011-1149

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

Name of Employer Occupation
Northwestern Mutual AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

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

Transaction ID: 7130247

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell D. Jenkins

Mailing Address 1988 Burlingame Rd.

City State Zip Code
Emporia KS 66801

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

Name of Employer Occupation
Northwestern Mutual Fin. Network Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

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

Transaction ID: 7130271

Amount of Each Receipt this Period
50.40

C. Full Name (Last, First, Middle Initial)
Mr. David B. Bianchi

Mailing Address 1125 Beldon Way

City State Zip Code
Reno NV 89503-3164

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

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

Transaction ID: 7130279

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **170.40**

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 46 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Kurtis L. Kidder

Mailing Address 1 N. Wacker Drive, Suite 4600

City State Zip Code
Chicago IL 60606-3384

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

Name of Employer Occupation
The McTigue Financial Group Director - Est. & Business Plng.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7130281

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Shannon J. Enders

Mailing Address 5677 Westwood Drive

City State Zip Code
Muskegon MI 49441

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

Name of Employer Occupation
Lakeshore Employee Benefits President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130285

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. Terry M. Kaltenbach

Mailing Address 1358 Ahlrich Ave

City State Zip Code
Encintas CA 92024-4029

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

Name of Employer Occupation
Phoenix Life Wealth Management Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130333

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **667.00**

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 47 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Walter J. Scott

Mailing Address 1022 WASHINGTON AVE.

City OSHKOSH State WI Zip Code 54901-5354

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

Name of Employer W. F. Coe & Associates, LLC Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

Date of Receipt 08 / 10 / 2008

Transaction ID: 7130347

Amount of Each Receipt this Period 50.40

B. Full Name (Last, First, Middle Initial)
Mr. Larry J. Winkelhake

Mailing Address 18600 Longview Ct

City Brookfield State WI Zip Code 53045

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

Name of Employer Mortensen-Winkelhake Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7130373

Amount of Each Receipt this Period 90.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Fowler

Mailing Address 13243 S.E. 51st Place

City Bellevue State WA Zip Code 98006

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

Name of Employer Fowler Financial Services, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 860.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7130381

Amount of Each Receipt this Period 107.50

SUBTOTAL of Receipts This Page (optional) ► 247.90

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 48 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. William James DeBruin	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 106 Edgewood Ln	Transaction ID: 7130383
	City State Zip Code Combined Locks WI 54113	Amount of Each Receipt this Period 72.00
	FEC ID number of contributing federal political committee. C	
Name of Employer William J. DeBruin Financial Services	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

B.	Full Name (Last, First, Middle Initial) Mr. Randall H. Jensen	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 124 W 46th St., #201	Transaction ID: 7130393
	City State Zip Code Kearney NE 68847	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
Name of Employer The Principal Financial Group	Occupation Sr. Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.00	

C.	Full Name (Last, First, Middle Initial) Mr. Gary H. Pendleton	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 2601 Oberlin Rd	Transaction ID: 7130397
	City State Zip Code Raleigh NC 27608-1319	Amount of Each Receipt this Period 45.83
	FEC ID number of contributing federal political committee. C	
Name of Employer Pendleton Financial Consulting, Inc.	Occupation President/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.64	

SUBTOTAL of Receipts This Page (optional)	160.33
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 49 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Randy Eschels

Mailing Address 5675 Winglake Rd.

City State Zip Code
Bloomfield Hills MI 48301-1252

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

Name of Employer Occupation
Eschels Financial Group Insurance Agent

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: 7130403

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. William T. Whitmore, Jr.

Mailing Address 3495 Winding Trail Circle

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer Occupation
Nationwide Financial Network Representative

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

Date of Receipt

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

Transaction ID: 7130419

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Theodore J. Zouzounis

Mailing Address 820 Mariposa Rd

City State Zip Code
Lafayette CA 94549-4211

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

Name of Employer Occupation
AXIA Employment Benefit Insurance Srvc PARTNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt

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

Transaction ID: 7130421

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional) ►

342.50

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 50 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence J. Stack

Mailing Address 28630 Glenbrook Dr

City State Zip Code
Southfield MI 48034-5543

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

Name of Employer Occupation
Michigan Financial Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130461

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Mr. Randall D. Kaufmann

Mailing Address 356 Equus Drive

City State Zip Code
Camp Hill PA 17011-8357

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

Name of Employer Occupation
Prudential Financial Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.50

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130475

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Ms. April L. Howard

Mailing Address 3386 Williamsburg

City State Zip Code
Boise ID 83706-5320

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

Name of Employer Occupation
Howard Insurance Agency Agent/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130497

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **165.00**

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 51 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Randy R. Kilgore

Mailing Address 4004 San Felice Pt.

City State Zip Code
Colorado Springs CO 80906

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

Name of Employer Occupation
Securian/Minnesota Life Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7130501

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Harold A. Gillet

Mailing Address 8711 Mashie Lane

City State Zip Code
Missoula MT 59808-5412

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

Name of Employer Occupation
Security Life of Denver General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130505

Amount of Each Receipt this Period
18.00

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

Mailing Address 22928 San Joaquin Drive East

City State Zip Code
Canyon Lake CA 92587-7831

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

Name of Employer Occupation
Torimax Financial Group, Inc. President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1667.50

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130531

Amount of Each Receipt this Period
208.50

SUBTOTAL of Receipts This Page (optional) ▶ **726.50**

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 52 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John C. Johns

Mailing Address 5141 Lilly Rd.

City State Zip Code
Hazlehurst MS 39083

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

Name of Employer Southern Farm Bureau Life Insurance
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

Transaction ID: 7130543

Amount of Each Receipt this Period 42.50

B. Full Name (Last, First, Middle Initial)
Mr. H. Dan Smith

Mailing Address 1616 Rio Vista

City State Zip Code
Dallas TX 75208-2338

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

Name of Employer State Farm Insurance Companies
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1775.00

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

Transaction ID: 7130589

Amount of Each Receipt this Period 220.00

C. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Rust

Mailing Address 114 W. Arnold

City State Zip Code
Bozeman MT 59715-6129

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

Name of Employer State Farm Insurance Companies
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

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

Transaction ID: 7130599

Amount of Each Receipt this Period 90.00

SUBTOTAL of Receipts This Page (optional) ► **352.50**

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 53 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. John J. Bradley		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 148 Grove Street		Transaction ID: 7130627		
	City Westwood	State MA	Zip Code 02090	Amount of Each Receipt this Period 41.66	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 333.28		
Name of Employer Bradley Insurance Agency, Inc.		Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Mr. Randy T. Robertson		Date of Receipt MM / DD / YYYY 08 / 21 / 2008		
	Mailing Address P.O. Box 93893		Transaction ID: 7130643		
	City Lubbock	State TX	Zip Code 79493-3893	Amount of Each Receipt this Period 450.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 450.00		
Name of Employer Sanford Insurance Agency		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mr. Donald L. Maricle		Date of Receipt MM / DD / YYYY 08 / 14 / 2008		
	Mailing Address 42 Pine Tree Ln.		Transaction ID: 7130681		
	City West Seneca	State NY	Zip Code 14224-4145	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 750.00		
Name of Employer C & M Capital Resources, Inc.		Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

991.66

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 54 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. R. Jan Pinney

Mailing Address 5152 Ellington Court

City State Zip Code
Granite Bay CA 95746-7188

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

Name of Employer Occupation
Pinney Insurance Center, Inc. General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1664.00

Date of Receipt

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

Transaction ID: 7130685

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)
Mr. Mitchell W. Ostrove

Mailing Address 4 New King Street

City State Zip Code
White Plains NY 10604-1202

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

Name of Employer Occupation
The Ostrove Group Inc. General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 336.00

Date of Receipt

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

Transaction ID: 7130695

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)
Mr. David M. Koll

Mailing Address 1612 S. 152nd Street

City State Zip Code
Omaha NE 68144-5121

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

Name of Employer Occupation
Mutual of Omaha Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 840.00

Date of Receipt

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

Transaction ID: 7130709

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

355.00

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 55 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Morland G. McManigal

Mailing Address 5237 Sunridge Dr

City State Zip Code
Fairfield CA 94534-6672

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

Name of Employer State Farm Ins. Co. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 7130733

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael J. Ables

Mailing Address PO Box 2205

City State Zip Code
Avila Beach CA 93424-2205

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

Name of Employer Michael Ables Insurance Services Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 980.00

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

Transaction ID: 7130747

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Mr. David T. Koppa

Mailing Address 1105 Via Bolzano

City State Zip Code
Santa Barbara CA 93111-1053

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

Name of Employer Cornerstone Insurance Services Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

Transaction ID: 7130751

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **217.50**

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 56 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey P. Case

Mailing Address 1311 33rd Avenue S.W.

City State Zip Code
Minot ND 58701-7266

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

Name of Employer Case Financial Services Inc Occupation General Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130773

Amount of Each Receipt this Period
27.00

B. Full Name (Last, First, Middle Initial)
Ms. Sandra E. Henderson

Mailing Address 207 E Moody Ave

City State Zip Code
Fresno CA 93720-1506

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

Name of Employer Health Guard Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130783

Amount of Each Receipt this Period
22.50

C. Full Name (Last, First, Middle Initial)
Mr. Robert T. MacDonald

Mailing Address 1931 N 73rd St.

City State Zip Code
Wauwatosa WI 53213

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

Name of Employer Farmers Financial Services Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130839

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► **76.50**

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 57 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Leonard Martin

Mailing Address 98 Tennyson Rd

City

Warwick

State

RI

Zip Code

02888-1818

FEC ID number of contributing federal political committee.

C

Name of Employer
Martin & Associates

Occupation
OWNER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130851

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas D. McNeil

Mailing Address 49 Hagen Oaks Ct

City

Alamo

State

CA

Zip Code

94507

FEC ID number of contributing federal political committee.

C

Name of Employer
Midland National Life

Occupation
Regional Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130975

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Keith M. Gillies

Mailing Address 109 W. Lakeview Dr.

City

La Place

State

LA

Zip Code

70068-2427

FEC ID number of contributing federal political committee.

C

Name of Employer
River Parishes Advisors
Group, LLC

Occupation
Managing Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

762.50

Date of Receipt

MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7130983

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

180.40

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 58 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Douglas Austin	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address Suite 9 Kite Hill Rd	Transaction ID: 7131001
	City State Zip Code Santa Cruz CA 95060-1418	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
Name of Employer Austin Ins & Financial Se- rv	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Alan C. Kifer	Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address 21500 Park Row Rd #1115	Transaction ID: 7131059
	City State Zip Code Katy TX 77449-2428	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	
Name of Employer L.I.F.E. Services LLC	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

C.	Full Name (Last, First, Middle Initial) Mr. Alan C. Kifer	Date of Receipt MM / DD / YYYY 08 / 11 / 2008
	Mailing Address 21500 Park Row Rd #1115	Transaction ID: 7131061
	City State Zip Code Katy TX 77449-2428	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	
Name of Employer L.I.F.E. Services LLC	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	462.50
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 59 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Ethan C. Emmett

Mailing Address 11451 SW 95 Ave.

City State Zip Code
Miami FL 33176

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

Name of Employer Emmett Insurance Group Occupation President

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

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2008

Transaction ID: 7131081

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Juli Y. McNeely

Mailing Address S764 Hanson Road

City State Zip Code
Spencer WI 54479

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

Name of Employer McNeely Financial Services Inc Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 408.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2008

Transaction ID: 7131085

Amount of Each Receipt this Period
51.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard L. Miller

Mailing Address 1214 Karr Ave.

City State Zip Code
Yakima WA 98902-5026

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

Name of Employer Northwestern Mutual Financial Network Occupation Financial Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.50

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2008

Transaction ID: 7131117

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **593.50**

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 60 / 134		
	<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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Anthony DiBernardo	Date of Receipt MM / DD / YYYY 08 / 18 / 2008
	Mailing Address 8291 Elmcrest Lane	Transaction ID: 7131205
	City State Zip Code Huntington Bch. CA 92646	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Flexible Insurance Plans, Inc. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Patricia S. Lucas	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 8375 Starlight Lane	Transaction ID: 7131217
	City State Zip Code Boones Mill VA 24065-1909	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Greystone Financial Group Occupation Financial Services Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00	

C.	Full Name (Last, First, Middle Initial) Ms. Rosa K. Dominy	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 4015-J Washington Rd	Transaction ID: 7131229
	City State Zip Code Martinez GA 30907-5183	Amount of Each Receipt this Period 25.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Life Ins. Co./IL Occupation AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00	

SUBTOTAL of Receipts This Page (optional)	567.50
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 61 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. John Everett

Mailing Address 531 Daniel

City State Zip Code
Santa Maria CA 93454

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

Name of Employer Allstate Life Ins. Co./IL Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7131231

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Ms. Carolyn S. Miller

Mailing Address 2469 W. Rosebush Rd

City State Zip Code
Weidman MI 48893-9791

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

Name of Employer General Agency Company Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7131245

Amount of Each Receipt this Period
21.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Hiller

Mailing Address W267 S7930 Stony Pt. Ct.

City State Zip Code
Mukwonago WI 53149-9687

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

Name of Employer Central Financial Services Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7131309

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **88.20**

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 62 / 134
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Robert A. Berg		Date of Receipt
	Mailing Address 1405 Blackberry Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Stevens Point	WI	54481-9140
	FEC ID number of contributing federal political committee.		Transaction ID: 7131311
Name of Employer Planning Concepts Inc.		Occupation Sales Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 36.00
		<input type="text"/> 288.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jonathan David Haymes		Date of Receipt
	Mailing Address 1230 s. hickory lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Nixa	MO	65714
	FEC ID number of contributing federal political committee.		Transaction ID: 7131341
Name of Employer Haymes Insurance Agency		Occupation Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.20
		<input type="text"/> 201.60	

C.	Full Name (Last, First, Middle Initial) Mr. James R. Christensen, Jr.		Date of Receipt
	Mailing Address 440 Regency Pkwy Dr #139		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Omaha	NE	68114
	FEC ID number of contributing federal political committee.		Transaction ID: 7131377
Name of Employer INSOURCE, Inc.		Occupation General Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 105.00
		<input type="text"/> 840.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 166.20
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John E. Duffin

Mailing Address 16131 Oliver St

City State Zip Code
Fishers IN 46037-7305

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

Name of Employer Occupation
Duffin Financial & Insurance Brokerage Brokerage Manager & Owner/President

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

Date of Receipt

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

Transaction ID: 7131463

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Gerald C. Grant, Jr.

Mailing Address 8560 SW 166 St.

City State Zip Code
Miami FL 33157-0414

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

Name of Employer Occupation
AXA Advisors, LLC Insurance Agent

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

Date of Receipt

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

Transaction ID: 7131535

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hollander

Mailing Address 904 Rockhurst Dr.

City State Zip Code
Lincoln NE 68510-4114

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

Name of Employer Occupation
Farm Bureau Insurance Services AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt

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

Transaction ID: 7131539

Amount of Each Receipt this Period

112.50

SUBTOTAL of Receipts This Page (optional)

462.50

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 64 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Dennis L. Miller	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 649 State Road P.O. Box 186	Transaction ID: 7131561
	City Vassar State MI Zip Code 48768-0186	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Farm Bureau Life Ins Co/MI Occupation Insurance Agent	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 340.00	

B.	Full Name (Last, First, Middle Initial) Ms. Jill M. Douglass	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 2932 Sunstone St.	Transaction ID: 7131583
	City Las Vegas State NV Zip Code 89128-7742	Amount of Each Receipt this Period 27.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Country Insurance & Financial Services Occupation Agency Manager	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 216.00	

C.	Full Name (Last, First, Middle Initial) Mr. David G. Klemisch	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 2801 26th Ave SW	Transaction ID: 7131625
	City Fargo State ND Zip Code 58103	Amount of Each Receipt this Period 51.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Klemisch Agency Occupation General Agent	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 408.00	

SUBTOTAL of Receipts This Page (optional)	120.50
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 65 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Richard L. Hoover

Mailing Address 2920 S. Jones Blvd., #110

City State Zip Code
Las Vegas NV 89146

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

Name of Employer Hoover and Associates Occupation Agency Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 576.00

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

Transaction ID: 7131627

Amount of Each Receipt this Period
72.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory Lynn Grimes

Mailing Address 2310 Live Oak Ln

City State Zip Code
Columbia MO 65202-1789

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

Name of Employer APEX Financial, LLC Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.60

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

Transaction ID: 7131643

Amount of Each Receipt this Period
25.20

C. Full Name (Last, First, Middle Initial)
Mr. Glenn J. Arons

Mailing Address 14710 Pettit Way

City State Zip Code
Potomac MD 20854-6015

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

Name of Employer Aron's & Associates Occupation PRINCIPAL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

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

Transaction ID: 7131677

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► **217.20**

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 66 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Thomas C. Besselman		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 6421 Perkins Rd #2B		Transaction ID: 7131683		
	City Baton Rouge	State LA	Zip Code 70808-4125	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer The Besselman & Little Agency		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

B.	Full Name (Last, First, Middle Initial) Mr. Richard J. Chandik		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 1332 Shorebird Ln		Transaction ID: 7131729		
	City Carlsbad	State CA	Zip Code 92011-4884	Amount of Each Receipt this Period 47.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Lincoln Financial Network		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00			

C.	Full Name (Last, First, Middle Initial) Mr. Joseph J. Maltese		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 4176 Arikakee Court		Transaction ID: 7131781		
	City Jacksonville	State FL	Zip Code 32223	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer John Hancock Della Porta Agency		Occupation Investment Advisor Rep.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 336.00			

SUBTOTAL of Receipts This Page (optional)	▶	139.50
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 67 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Steve L. Hampton

Mailing Address P.O. Box 319

City

Upton

State

WY

Zip Code

82730-0319

FEC ID number of contributing federal political committee.

C

Name of Employer
Hampton Insurance & Financial Services

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

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

Transaction ID: 7131893

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Ms. Queenie M. Chee

Mailing Address 833 Waika Place

City

Honolulu

State

HI

Zip Code

96825-1061

FEC ID number of contributing federal political committee.

C

Name of Employer
The Principal Financial Group

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

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

Transaction ID: 7132001

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. F. Nicholas Kelley

Mailing Address 1323 S. 174 St.

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing federal political committee.

C

Name of Employer
Kelley Financial Services, Inc

Occupation
President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

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

Transaction ID: 7132047

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

105.00

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 68 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph P. Fox

Mailing Address 1751 Upper 55th St, E.

City State Zip Code
Inver Grove Height MN 55077

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

Name of Employer Occupation
North Star Resource Group Field Manager

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

Date of Receipt

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

Transaction ID: 7132117

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Fred Kazmierski

Mailing Address 1116 Grand Ave Ste 204

City State Zip Code
Billings MT 59102-4282

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

Name of Employer Occupation
MMA Financial Services Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

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

Transaction ID: 7132119

Amount of Each Receipt this Period

27.00

C.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Chandik

Mailing Address 42 Ritz Cove Drive

City State Zip Code
Dana Point CA 92629

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

Name of Employer Occupation
Financial Diligence Partners Agent/Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 840.00

Date of Receipt

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

Transaction ID: 7132123

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional) ▶

382.00

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 69 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Jerry E. Jensen	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 190 So. 800 W.	Transaction ID: 7132129
	City State Zip Code Blackfoot ID 83221-6132	Amount of Each Receipt this Period 50.40
	FEC ID number of contributing federal political committee. C	
Name of Employer Jensco, Inc.	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.20	

B.	Full Name (Last, First, Middle Initial) Mr. Timothy J. Brungardt	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 314 N. 5th.	Transaction ID: 7132131
	City State Zip Code Norfolk NE 68701-4093	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Heritage Financial Services	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

C.	Full Name (Last, First, Middle Initial) Mr. Casey C. Knake	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 2902 Mach I Dr.	Transaction ID: 7132137
	City State Zip Code Norfolk NE 68701-3238	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Heritage Financial Services, L.L.C.	Occupation Investment Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

SUBTOTAL of Receipts This Page (optional)	134.40
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 70 / 134
(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

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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Lawrence

Mailing Address 5553 Peters Drive

City State Zip Code
West Bend WI 53095

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

Name of Employer: Modern Woodmen of America
Occupation: Agency Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
408.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7132139
Amount of Each Receipt this Period: 51.00

B. Full Name (Last, First, Middle Initial)
Mr. Albert T. Hurst, Jr.

Mailing Address 1901 S. Broadway St.

City State Zip Code
Little Rock AR 72206-1351

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

Name of Employer: Modern Woodmen of America
Occupation: Agency Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7132159
Amount of Each Receipt this Period: 25.20

C. Full Name (Last, First, Middle Initial)
Mr. Dennis L. Helgeson

Mailing Address 2601 Bel Air Drive

City State Zip Code
Minot ND 58703-1749

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

Name of Employer: North American Company
Occupation: General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7132163
Amount of Each Receipt this Period: 25.20

SUBTOTAL of Receipts This Page (optional) ► **101.40**

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 71 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Steven Dwayne Gifford

Mailing Address P.O. Box 5027

City State Zip Code
Ashland KY 41105

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

Name of Employer Occupation
Mutual of Omaha Companies General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132193

Amount of Each Receipt this Period
25.20

B.

Full Name (Last, First, Middle Initial)
Mr. Harlynn N. Bjerke

Mailing Address P. O. Box 144

City State Zip Code
Adams ND 58210-0144

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

Name of Employer Occupation
Mutual of Omaha Companies AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132203

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jaford D. Burgad

Mailing Address 3842 N. 10th St.

City State Zip Code
Fargo ND 58102-1044

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

Name of Employer Occupation
Mutual of Omaha Companies Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132209

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **85.20**

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 72 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Juan L. Cosio		Date of Receipt MM / DD / YYYY 08 / 20 / 2008		
	Mailing Address 12213 S.W. 102 Terrace		Transaction ID: 7132327		
	City Miami	State FL	Zip Code 33186	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer New York Life Insurance Co.	Occupation Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
250.00

B.	Full Name (Last, First, Middle Initial) Mr. Robert A. Brandon		Date of Receipt MM / DD / YYYY 08 / 20 / 2008		
	Mailing Address 9440 Old Cutler Lane Journeys End		Transaction ID: 7132483		
	City Coral Gables	State FL	Zip Code 33156-2243	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Robert A. Brandon, Inc.	Occupation General Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
500.00

C.	Full Name (Last, First, Middle Initial) Mr. Samuel H. Hazleton, IV		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 4220 Lakeshore Drive		Transaction ID: 7132495		
	City Diamond Point	State NY	Zip Code 12824	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Northwestern Mutual	Occupation Financial Representative	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
336.00

SUBTOTAL of Receipts This Page (optional)	792.00
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 73 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Todd G. Grantham

Mailing Address 203 Brandermill Drive

City State Zip Code
Durham NC 27713

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

Name of Employer: Northwestern Mutual Financial Network
Occupation: Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7132519
 Amount of Each Receipt this Period: 115.50

B. Full Name (Last, First, Middle Initial)
Mr. James R. Goodrich

Mailing Address 1860 Beech

City State Zip Code
Mt. Pleasant MI 48858-1280

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

Name of Employer: Northwestern Mutual
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7132527
 Amount of Each Receipt this Period: 42.50

C. Full Name (Last, First, Middle Initial)
Mr. Steven Marc Dugal

Mailing Address 12238 E Millburn Ave

City State Zip Code
Baton Rouge LA 70815-6742

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

Name of Employer: Northwestern Mutual
Occupation: Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 22 / 2008
Transaction ID: 7132535
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **408.00**

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 74 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City State Zip Code
Orem UT 84097

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

Name of Employer S. B. HEINZ & ASSOCIATES, INC. Occupation Financial Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132543

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Karl G. Hagman

Mailing Address 8796 Longs Peak Circle

City State Zip Code
Windsor CO 80550-2647

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

Name of Employer Northwestern Mutual-TCG Occupation Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2008

Transaction ID: 7132569

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Kevin K. Burckhard

Mailing Address 413-25th Ave NW

City State Zip Code
Minot ND 58703-0726

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

Name of Employer Northwestern Mutual Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132589

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► **327.00**

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 75 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City State Zip Code
Oil City LA 71061

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

Name of Employer Occupation
Burke & Burke Insurance Agency Owner
Mktg, Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

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

Transaction ID: 7132625

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard B. Jacobs

Mailing Address 5396 Painted Sunrise Dr.

City State Zip Code
Las Vegas NV 89149-6443

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

Name of Employer Occupation
Principal Financial Group Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.60

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

Transaction ID: 7132685

Amount of Each Receipt this Period
25.20

C.

Full Name (Last, First, Middle Initial)
Mr. Terry K. Headley

Mailing Address 20704 Meadow Ridge Dr

City State Zip Code
Springfield NE 68059-7086

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

Name of Employer Occupation
Headley / Scott & Associates General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1754.00

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

Transaction ID: 7132697

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **338.20**

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 76 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard D. Kimmel

Mailing Address 6525 Bellaire Drive S

City State Zip Code
Ft Worth TX 76132-1138

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

Name of Employer Southwest Business Center Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: 7132707

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Evelyn Butler

Mailing Address 10 Lincoln Ave.

City State Zip Code
Vernon NJ 07462

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

Name of Employer Certified Financial Services, LLC Occupation Field Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

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

Transaction ID: 7132785

Amount of Each Receipt this Period
25.20

C.

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

Mailing Address 1802 First Ave

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer Jolliffe Capital, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

Transaction ID: 7132837

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **117.70**

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 77 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. James C. Koburger

Mailing Address 3134 Brandywine Drive

City State Zip Code
Tallahassee FL 32308

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

Name of Employer Southern Farm Bureau Life Insurance
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7132849

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Phillip M. Brazell

Mailing Address 125 Bakers Point Rd

City State Zip Code
Columbia SC 29223-8425

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

Name of Employer Southern Farm Bureau Life
Occupation Agency Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2008

Transaction ID: 7132883

Amount of Each Receipt this Period
275.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael A. Lundy

Mailing Address 1289 Homestead Dr.

City State Zip Code
Xenia OH 45385-7027

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

Name of Employer State Farm Insurance Companies
Occupation Agent/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2008

Transaction ID: 7132951

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1025.00**

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 78 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas K. Kilton

Mailing Address 1933 E River Pkwy

City State Zip Code
Minneapolis MN 55408

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

Name of Employer State Farm Insurance Companies
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132953

Amount of Each Receipt this Period
21.00

B.

Full Name (Last, First, Middle Initial)
Mr. William A. Hume

Mailing Address 1075 Woodfield Lane

City State Zip Code
Libertyville IL 60048

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

Name of Employer State Farm Insurance Companies
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7132989

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Ms. Maria Elena Cisneros

Mailing Address 7125 SW 93 Court

City State Zip Code
Miami FL 33173-2342

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

Name of Employer State Farm Insurance Companies
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 7133053

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **563.50**

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 79 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Darrel V. Hovde

Mailing Address 1001 19th Ave SW

City State Zip Code
Minot ND 58701

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

Name of Employer State Farm Ins. Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.80

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

Transaction ID: 7133067

Amount of Each Receipt this Period
30.60

B.

Full Name (Last, First, Middle Initial)
Ms. Cylinda A. Clark

Mailing Address 4002 San Mateo

City State Zip Code
Plano TX 75093-6618

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

Name of Employer A&H Benefits Employee Ben- efits, Inc. Occupation Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

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

Transaction ID: 7133091

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ronald L. Gay

Mailing Address 3000 Briarcrest Ste. 422

City State Zip Code
Bryan TX 77802-3000

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

Name of Employer Scott & White Health Plan Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

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

Transaction ID: 7133123

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **115.10**

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 80 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City Puunene State HI Zip Code 96784

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

Name of Employer Transamerica Life Insurance Companies Occupation Branch Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7133141
 Amount of Each Receipt this Period: 37.50

B. Full Name (Last, First, Middle Initial)
Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City Puunene State HI Zip Code 96784

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

Name of Employer Transamerica Life Insurance Companies Occupation Branch Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 187.50

Date of Receipt: 08 / 15 / 2008
Transaction ID: 7133143
 Amount of Each Receipt this Period: -37.50

C. Full Name (Last, First, Middle Initial)
Mr. Richard E. Keeling

Mailing Address 9507 Wessex PI

City Louisville State KY Zip Code 40222-5042

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

Name of Employer Transamerica Occidental Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7133149
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 81 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. J. Blayne Bird

Mailing Address 315 Willow Drive

City State Zip Code
Blackfoot ID 83221-3907

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

Name of Employer Archibald Insurance Center Occupation Financial Services Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: 7133173

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. C. Robert Brown, Sr.

Mailing Address 8675 WestCott

City State Zip Code
Germantown TN 38138-7738

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

Name of Employer UCL Financial Group Occupation President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 7133187

Amount of Each Receipt this Period
62.50

C. Full Name (Last, First, Middle Initial)
Mr. David W. Daigle

Mailing Address 5300 Stone Place Ave

City State Zip Code
Gillette WY 82718

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

Name of Employer Mountain West Farm Bureau Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

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

Transaction ID: 7133213

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **113.50**

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 82 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Lane Boozer

Mailing Address 1400 N Corinth St Ste 109

City State Zip Code
Corinth TX 76208-5444

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

Name of Employer Don Boozer & Assoc. Occupation Vice President - Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7133273

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Lane Boozer

Mailing Address 1400 N Corinth St Ste 109

City State Zip Code
Corinth TX 76208-5444

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

Name of Employer Don Boozer & Assoc. Occupation Vice President - Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2008

Transaction ID: 7133275

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Ms. Sharon L. Sparling

Mailing Address P.O. Box 1914

City State Zip Code
Mount Vernon WA 98273-1914

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

Name of Employer Occupation PRODUCER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7133316

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► 145.00

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 83 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Sharon L. Sparling
Mailing Address P.O. Box 1914
City State Zip Code
Mount Vernon WA 98273-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Occupation PRODUCER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8
Transaction ID: 7133324
Amount of Each Receipt this Period
-45.00

B. Full Name (Last, First, Middle Initial)
Mr. Alan R. Zalewski
Mailing Address 6908 North 27th Street
City State Zip Code
Tacoma WA 98407-1002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Burnley Wilson Associates President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 8
Transaction ID: 7133330
Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Patrick M. Mucci, Jr.
Mailing Address 1135 Clifton Avenue
City State Zip Code
Clifton NJ 07013-3642
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
M. M. M. Associates Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8
Transaction ID: 7133340
Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► 125.00
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 84 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Allan B. Schon

Mailing Address 441 16th NW

City State Zip Code
Minot ND 58703-1941

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

Name of Employer Executive Financial Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

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

Transaction ID: 7133411

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mrs. Susan Diane Wier

Mailing Address 8023 South Zikes Rd

City State Zip Code
Bloomington IN 47401-9178

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

Name of Employer First American Trust Occupation Executive Vice President

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

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

Transaction ID: 7133435

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James John Silbernagel

Mailing Address W 2329 Capital Drive

City State Zip Code
Campbellsport WI 53010-3010

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

Name of Employer Silbernagel & Jäsen Financial Occupation CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

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

Transaction ID: 7133443

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **590.00**

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 85 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John Palladino, Jr.
Mailing Address 15060 Becky Lane
City State Zip Code
Monte Sereno CA 95030-2106
FEC ID number of contributing federal political committee. **C**
Name of Employer Link-Allen Benefit Group Occupation V.P.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00
Date of Receipt 08 / 10 / 2008
Transaction ID: 7133487
Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Mr. Irv Wiese
Mailing Address 318 Stamford Bridge Rd
City State Zip Code
Columbia SC 29212
FEC ID number of contributing federal political committee. **C**
Name of Employer MW Group Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00
Date of Receipt 08 / 10 / 2008
Transaction ID: 7133501
Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard A. Strevey
Mailing Address 15311 Bemis Street
City State Zip Code
Omaha NE 68154-1882
FEC ID number of contributing federal political committee. **C**
Name of Employer Strevey Financial Services Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.50
Date of Receipt 08 / 25 / 2008
Transaction ID: 7133507
Amount of Each Receipt this Period 187.50

SUBTOTAL of Receipts This Page (optional) ► 271.50
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 86 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. David L. Sparks

Mailing Address PO Box 3509

City State Zip Code
Hickory NC 28603

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

Name of Employer Occupation
Capital Concepts Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 412.50

Date of Receipt

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

Transaction ID: 7133569

Amount of Each Receipt this Period

137.50

B.

Full Name (Last, First, Middle Initial)

Mr. Marvin L. Spreen

Mailing Address 5759 Mount Vernon Rd

City State Zip Code
Brenham TX 77833-7708

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

Name of Employer Occupation
Thrivent Financial for Lu-therans Financial Associate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.00

Date of Receipt

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

Transaction ID: 7133589

Amount of Each Receipt this Period

26.00

C.

Full Name (Last, First, Middle Initial)

Mr. John F. Ridoux

Mailing Address 911 Thorpe Drive

City State Zip Code
Louisville KY 40243-1959

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

Name of Employer Occupation
Allstate Life Ins. Co./IL Agency Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.60

Date of Receipt

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

Transaction ID: 7133613

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

188.70

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 87 / 134
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Robert A. Styrkowicz

Mailing Address 361 Pines Blvd.

City State Zip Code
Lake Villa IL 60046-6600

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

Name of Employer Allstate Insurance Occupation Exclusive Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

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

Transaction ID: 7133619

Amount of Each Receipt this Period
65.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert W. Rensing

Mailing Address 2515 S. 105th Ave

City State Zip Code
Omaha NE 68124-1825

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

Name of Employer Robert Rensing Agency, Inc Occupation President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7133637

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. James E. Mitchell

Mailing Address 2209 Ontario

City State Zip Code
Bellingham WA 98229-4027

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

Name of Employer Northwestern Financial Services Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

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

Transaction ID: 7133687

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **182.00**

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 88 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr. Michael G. Murphy		Date of Receipt MM / DD / YYYY 08 / 10 / 2008
Mailing Address 1014 S. 54th St.		Transaction ID: 7133751
City Omaha	State NE	Zip Code 68106-1732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.50
Name of Employer Grace/Mayer Insurance	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.50	

B.

Full Name (Last, First, Middle Initial) Mr. Gary M. Owens		Date of Receipt MM / DD / YYYY 08 / 10 / 2008
Mailing Address PO Box 835		Transaction ID: 7133793
City Sultan	State WA	Zip Code 98294
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.50
Name of Employer Gary M Owens Insurance Agency Inc	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

C.

Full Name (Last, First, Middle Initial) Mr. John W. Wheeler, Jr.		Date of Receipt MM / DD / YYYY 08 / 10 / 2008
Mailing Address 1075 Aster Ln.		Transaction ID: 7133803
City West Chicago	State IL	Zip Code 60185-1750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

SUBTOTAL of Receipts This Page (optional)	▶	127.00
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 89 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Brian M. Sharkey

Mailing Address 20 Sleepy Hollow Dr

City State Zip Code
Newtown Square PA 19073-3934

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

Name of Employer: Karr Barth Associates, Inc.
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 08 / 25 / 2008
Transaction ID: 7133819
 Amount of Each Receipt this Period: 600.00

B. Full Name (Last, First, Middle Initial)
Mr. Harry E. Sechman

Mailing Address 13 Beechwood Dr

City State Zip Code
Rutland MA 01543-1751

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

Name of Employer: H.E. Sechman Retirement Planning
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.50

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7133833
 Amount of Each Receipt this Period: 42.50

C. Full Name (Last, First, Middle Initial)
Mr. Walter M. Schieffer, Jr.

Mailing Address 17501 John Wayne

City State Zip Code
Perry OK 73077-9513

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

Name of Employer: Schieffer & Schieffer, Inc.
Occupation: President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt: 08 / 10 / 2008
Transaction ID: 7133861
 Amount of Each Receipt this Period: 25.20

SUBTOTAL of Receipts This Page (optional) ► **667.70**

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 90 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Wells

Mailing Address 18830 Los Hermanos Ranch Rd

City State Zip Code
Valley Center CA 92082-6808

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

Name of Employer Occupation
Farmers Financial Services Owner/Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7133867

Amount of Each Receipt this Period
47.50

B. Full Name (Last, First, Middle Initial)
Mr. Terry L. Poynor

Mailing Address 1220 N Prince St

City State Zip Code
Clovis NM 88101

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

Name of Employer Occupation
Farmers Insurance Group Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7133869

Amount of Each Receipt this Period
25.20

C. Full Name (Last, First, Middle Initial)
Mr. John Henry Ogden

Mailing Address 4109 Mohawk Cir

City State Zip Code
Springdale AR 72764-7547

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

Name of Employer Occupation
Farmers Insurance Group AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7133897

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► 99.70

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 91 / 134
	<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	

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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Roger L. Owens	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 104 Landing Lane	Transaction ID: 7133911
	City State Zip Code Elkton MD 21921-5204	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rymark Financial Services Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 529.50	

B.	Full Name (Last, First, Middle Initial) Mr. Robert J. Morales	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 1125 Wyoming Avenue	Transaction ID: 7133913
	City State Zip Code Reno NV 89503-3342	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Brecek & Young Advisors, Inc. General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C.	Full Name (Last, First, Middle Initial) Ms. Carolyn R. Watson	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 2032 Hollis	Transaction ID: 7133933
	City State Zip Code Abilene TX 79605-5726	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Ohio National Financial Services Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	177.50
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 92 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Steven M. Stratton

Mailing Address 17131 Parkview Dr

City State Zip Code
Morgan Hill CA 95037-6606

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

Name of Employer Capital Planning Partners, LLC
Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
890.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7133965

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kenneth A. Sherlin, III

Mailing Address 8 First Street

City State Zip Code
Ashville NC 28803-1414

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

Name of Employer Keystone/Benefit Design
Occupation Marketing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134005

Amount of Each Receipt this Period
13.75

C.

Full Name (Last, First, Middle Initial)
Ms. Shelley M. Rowe

Mailing Address 5908 E. Conservation Dr.

City State Zip Code
Longmont CO 80504

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

Name of Employer Generations Financial Resources
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134049

Amount of Each Receipt this Period
37.50

SUBTOTAL of Receipts This Page (optional) ► **156.25**

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 93 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Boyd Lee Williams

Mailing Address 7023 W. Willamette Ave

City State Zip Code
Kennewick WA 99336-1280

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Kansas City Life Insurance Sales Manager
Company

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1664.00

Date of Receipt

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

Transaction ID: 7134055

Amount of Each Receipt this Period
208.00

B. Full Name (Last, First, Middle Initial)
Mr. Pierce Allen Stevens, Jr.

Mailing Address P O Box 119

City State Zip Code
Anguilla MS 38721

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Capital Care President

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

Date of Receipt

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

Transaction ID: 7134087

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mr. Martin F. Palumbos

Mailing Address 87 Parkside Lane

City State Zip Code
Rochester NY 14612-3231

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Sagemark Consulting Certified Financial Planner

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

Date of Receipt

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

Transaction ID: 7134109

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 738.00

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 94 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John F. Nichols

Mailing Address 1331 W Norwood Avenue

City State Zip Code
Chicago IL 60660-2509

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

Name of Employer Disability Resource Group, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1086.00

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

Transaction ID: 7134215

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Mr. Benson B. Terrell, Jr.

Mailing Address 9261 Lanier Rd

City State Zip Code
Lake Charles LA 70607-0352

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

Name of Employer Barry Terrell & Associates Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: 7134277

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City State Zip Code
Sioux Falls SD 57103-7248

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

Name of Employer Modern Woodmen of America Occupation Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 7134283

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **167.00**

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 95 / 134

(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Marlin D. Wells

Mailing Address 2201 N. Washington

City State Zip Code
Roswell NM 88201-3377

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

Name of Employer Occupation
AXA Advisors, LLC Financial Professional

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

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

Transaction ID: 7134295

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory B. Schaeffer

Mailing Address 3627 - 22nd St.

City State Zip Code
Kenosha WI 53144-1443

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

Name of Employer Occupation
The Schaeffer Group, LLC AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.00

Date of Receipt

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

Transaction ID: 7134349

Amount of Each Receipt this Period

27.00

C.

Full Name (Last, First, Middle Initial)

Mr. David G. Zick

Mailing Address 851 Adams Court

City State Zip Code
Bloomfield Hills MI 48304

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

Name of Employer Occupation
Group Associates, Inc. General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1875.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 0 8

Transaction ID: 7134373

Amount of Each Receipt this Period

625.00

SUBTOTAL of Receipts This Page (optional)

682.00

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 96 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. John P. Steele

Mailing Address 122 West Main

City State Zip Code
Manhattan MT 59741

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

Name of Employer Occupation
Montana Employee Benefit Insurance Agent
Co.

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134427

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Ms. Ellie K. Mills

Mailing Address 18661 Belmont Dr.

City State Zip Code
Miami FL 33157

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

Name of Employer Occupation
State Farm Insurance Office Rep.

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 7134477

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. August P. Richter, IV

Mailing Address 401 Wild Oak Drive

City State Zip Code
Manitowoc WI 54220-9054

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

Name of Employer Occupation
Northwestern Mutual Special Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.20

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134521

Amount of Each Receipt this Period
50.40

SUBTOTAL of Receipts This Page (optional) ► **580.40**

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 97 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Robert W. Tull	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 7815 Eagle Rock, N.E.	Transaction ID: 7134581
	City State Zip Code Albuquerque NM 87122	Amount of Each Receipt this Period 25.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Northwestern Mutual Fin Network Occupation: Senior Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00	

B.	Full Name (Last, First, Middle Initial) Mr. Peter D. Sullivan	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 824 Holter St	Transaction ID: 7134611
	City State Zip Code Helena MT 59601-6161	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Sullivan Financial Group Occupation: Registered Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.60	

C.	Full Name (Last, First, Middle Initial) Mr. Stan B. Towerman	Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address 11592 New London Drive	Transaction ID: 7134667
	City State Zip Code Creve Coeur MO 63141-8345	Amount of Each Receipt this Period 180.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: The Towerman Organization Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	230.70
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 98 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Robert E. Ross

Mailing Address 3918 S. Lisbon Way

City Aurora State CO Zip Code 80013-6032

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

Name of Employer Ross South Metro Agency, Inc. Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7134669

Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Mr. James A. Shalek

Mailing Address 1706 Candleberry Lane

City Yorkville State IL Zip Code 60560-5810

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

Name of Employer Principal Financial Group Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 567.50

Date of Receipt 08 / 10 / 2008

Transaction ID: 7134675

Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Brian E. O'Brien

Mailing Address 1651 Wolf Run Dr.

City Richfield State WI Zip Code 53076-9686

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

Name of Employer The Principal Financial Group Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7134677

Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 177.00

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 99 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Lester E. Westgard

Mailing Address 2714 26th Ave SW

City State Zip Code
Fargo ND 58103-5006

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

Name of Employer
The Principal Financial Group

Occupation
Special Marketing Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134693

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Mr. Leo Thomas

Mailing Address 1925 Century Park E 4th Fl

City State Zip Code
Los Angeles CA 90067-2701

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

Name of Employer
PRB Inc.

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.50

Date of Receipt
MM / DD / YYYY
08 / 22 / 2008

Transaction ID: 7134737

Amount of Each Receipt this Period
187.50

C.

Full Name (Last, First, Middle Initial)
Ms. Cheryl R. Parker

Mailing Address 4120 Rainbow Drive

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer
Atlantic Charter Insurance Group

Occupation
AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134753

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **272.50**

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 100 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Michael W. Struebing

Mailing Address 16112 Parker Street

City State Zip Code
Omaha NE 68118-2429

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Heritage Financial Services, LLC Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7134765

Amount of Each Receipt this Period 42.50

B. Full Name (Last, First, Middle Initial)
Mr. C. Wayne Perkins

Mailing Address 171A County Road 198

City State Zip Code
Oxford MS 38655

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Southern Farm Bureau Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7134809

Amount of Each Receipt this Period 37.50

C. Full Name (Last, First, Middle Initial)
Mr. Todd A. Otto

Mailing Address 945 Senior Ave

City State Zip Code
Dickinson ND 58601-3757

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
State Farm Insurance Companies AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt 08 / 10 / 2008

Transaction ID: 7134827

Amount of Each Receipt this Period 25.20

SUBTOTAL of Receipts This Page (optional) 105.20

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 101 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Edward F. Randolph

Mailing Address 1515 Mill Bay Road

City State Zip Code
Kodiak AK 99615-6233

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

Name of Employer Edward F Randolph Ins. Agency
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

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

Transaction ID: 7134865

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. B. Keith Potts

Mailing Address P.O. Box 821

City State Zip Code
Wolfforth TX 79382

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

Name of Employer State Farm Insurance Companies
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

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

Transaction ID: 7134885

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Mr. Brad Tison

Mailing Address 3216 Southern Woods Drive

City State Zip Code
Des Moines IA 50321

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

Name of Employer The Achievement Group/Maxx Financial
Occupation Regional Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.20

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

Transaction ID: 7134933

Amount of Each Receipt this Period
50.40

SUBTOTAL of Receipts This Page (optional) ► **127.40**

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 102 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard R. Rios

Mailing Address 8720 El Chapul Way

City State Zip Code
Fair Oaks CA 95628-5454

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

Name of Employer Brecek & Young Advisors Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134941

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Cliff F. Wilson

Mailing Address 1458 W. Bahia Court

City State Zip Code
Gilbert AZ 85233-5600

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

Name of Employer Southeast Arizona Ins. Services, LTD / Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7134985

Amount of Each Receipt this Period
126.00

C.

Full Name (Last, First, Middle Initial)
Mr. Harry S. Rosnick

Mailing Address 3435 Jefferson Davis Hwy
P.O. Box 360

City State Zip Code
Fredericksburg VA 22404-0360

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

Name of Employer Nationwide Insurance Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 277.50

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7135009

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 206.00

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 103 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Nancy P. Cubberley
Mailing Address P O Box 5109
City Sevierville State TN Zip Code 37864
FEC ID number of contributing federal political committee. **C**
Name of Employer Cubberley Agency, Inc. Occupation MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 08 / 10 / 2008
Transaction ID: 7135141
Amount of Each Receipt this Period 27.50

B. Full Name (Last, First, Middle Initial)
Mr. Charles A. Webb
Mailing Address 2516 Longview Ave.
City Roanoke State VA Zip Code 24014-1509
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefits Group, Inc. Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00
Date of Receipt 08 / 10 / 2008
Transaction ID: 7135165
Amount of Each Receipt this Period 42.50

C. Full Name (Last, First, Middle Initial)
Mr. Miguel Paredes
Mailing Address 5927 Tamarisk
City San Luis Obispo State CA Zip Code 93401-8281
FEC ID number of contributing federal political committee. **C**
Name of Employer Neal Truesdale Ins. Occupation Benefits
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00
Date of Receipt 08 / 10 / 2008
Transaction ID: 7135232
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 112.00
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 104 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Dianne C. Mitchell

Mailing Address 2209 Ontario Street

City Bellingham State WA Zip Code 98226

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

Name of Employer AmerUs Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7135294

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Brian D. Boesiger

Mailing Address 7021 S. 33rd Street

City Lincoln State NE Zip Code 68516-4886

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

Name of Employer Benefit Management Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 10 / 2008

Transaction ID: 7135332

Amount of Each Receipt this Period 32.50

C.

Full Name (Last, First, Middle Initial)
Ms. Sandra O'Day

Mailing Address 10401 S.W. 62 Avenue

City Miami State FL Zip Code 33156

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

Name of Employer State Farm Insurance Companies Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2008

Transaction ID: 7135412

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 557.50

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 105 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Constance Y. Golleher		Date of Receipt	
	Mailing Address PO Box 255		M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 7135587
	Mc Lean	VA	22101-0255	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer The Holleman Companies		Occupation Director of Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

B.	Full Name (Last, First, Middle Initial) Steve Myers		Date of Receipt	
	Mailing Address 9004 S.W. 152 Street		M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 7135631
	Miami	FL	33157	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer State Farm		Occupation AGENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Mr. Larry G. Johnson		Date of Receipt	
	Mailing Address 44466 Albert		M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 7135645
	Plymouth	MI	48170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		27.50	
Name of Employer Farm Bureau Ins Co		Occupation AGENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional)	▶	557.50
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 106 / 134
(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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mrs. Susan B. Godwin

Mailing Address 3515 Ty Lane

City Milton State FL Zip Code 32571-9405

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

Name of Employer Godwin Insurance Agency Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00

Date of Receipt

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

Transaction ID: 7135673

Amount of Each Receipt this Period

25.50

B.

Full Name (Last, First, Middle Initial)

Mr. Greg W. Jacobs

Mailing Address 1350 Grand Summitt Drive #116

City Reno State NV Zip Code 89523

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

Name of Employer Hendricks Insurance Agency Occupation Financial Representative

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 201.60

Date of Receipt

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

Transaction ID: 7135691

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Sharon G. Heierman

Mailing Address 2990 Kemp Rd

City Havana State FL Zip Code 32333

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

Name of Employer NAIFA- Florida Occupation CEO

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00

Date of Receipt

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

Transaction ID: 7135763

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

92.70

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 107 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. David L. Belk		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 2 Bay Tree Court		Transaction ID: 7135813		
	City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period 46.20	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Belk Financial Group	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 369.60			

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Luke Simons		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 713 Carper Dr		Transaction ID: 7135829		
	City Artesia	State NM	Zip Code 88210-2344	Amount of Each Receipt this Period 50.40	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Simons and Associates	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 403.20			

C.	Full Name (Last, First, Middle Initial) Mr. Paul Adams		Date of Receipt MM / DD / YYYY 08 / 10 / 2008		
	Mailing Address 5101 Missy Maric Lane		Transaction ID: 7135843		
	City Las Vegas	State NV	Zip Code 89130	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Clearline Financial Group	Occupation Field Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

SUBTOTAL of Receipts This Page (optional)	▶	246.60
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 108 / 134		
	<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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr Joseph L Morton, III		Date of Receipt MM / DD / YYYY 08 / 10 / 2008
Mailing Address 5487 N. Bach		Transaction ID: 7135901
City Meridian	State ID	Zip Code 83642
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Intermountain Legal Group	Occupation Attorney At Law	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.00	

B.

Full Name (Last, First, Middle Initial) Mr. George W. Williams, Jr.		Date of Receipt MM / DD / YYYY 08 / 10 / 2008
Mailing Address 4109 Woodway Dr		Transaction ID: 7136131
City Monroe	State LA	Zip Code 71201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.50
Name of Employer Benefit Plan Service	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.50	

C.

Full Name (Last, First, Middle Initial) Mr. Roger Gonzalez		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 10530 N.W. 51 Street		Transaction ID: 7136523
City Doral	State FL	Zip Code 33178
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer National Marketing Group Services, Inc	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	418.50
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 109 / 134
	<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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mrs. Diane K. Neely	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 6635 SW Ventura Dr	Transaction ID: 7136561
	City State Zip Code Portland OR 97223	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 945.00	

B.	Full Name (Last, First, Middle Initial) Mr. James C. Clabuesch	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 11375 Fairway Dr	Transaction ID: 7136625
	City State Zip Code Roscommon MI 48653	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Clabuesch Financial Services Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Thomas F. Lowry	Date of Receipt MM / DD / YYYY 08 / 12 / 2008
	Mailing Address 3811 Glen Arbor Ct	Transaction ID: 7136653
	City State Zip Code atlanta GA 30319	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Georgia Financial Group, LLC President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	405.00
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 110 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Rex W. Oliver	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 1173 South 250 West Suite 201	Transaction ID: 7136871
	City State Zip Code Saint George UT 84770-6739	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Oliver Insurance and Financial Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

B.	Full Name (Last, First, Middle Initial) Ms. Sharon L. Hansen	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address P.O. Box 1249 1219 S Second Street	Transaction ID: 7136881
	City State Zip Code Mt Vernon WA 98273	Amount of Each Receipt this Period 27.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Heritage Financial Group, Inc Financial Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mr. Earl A. Thompson	Date of Receipt MM / DD / YYYY 08 / 10 / 2008
	Mailing Address 21014 Pricewood Manor Ct.	Transaction ID: 7136957
	City State Zip Code Cypress TX 77433	Amount of Each Receipt this Period 47.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation State Farm Insurance Companies Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.00	

SUBTOTAL of Receipts This Page (optional)	117.00
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 111 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Clark

Mailing Address 1603 22nd St Ste 202

City State Zip Code
West Des Moines IA 50266-1410

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

Name of Employer Compensation Designs Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 10 / 2008
Transaction ID: 7136987
Amount of Each Receipt this Period 60.00

B. Full Name (Last, First, Middle Initial)
Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City State Zip Code
West Monroe LA 71291

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

Name of Employer MetLife Financial Services Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 10 / 2008
Transaction ID: 7137009
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. J Michael Clinton

Mailing Address 3525 Tilford Cir

City State Zip Code
Monroe LA 71201

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

Name of Employer MetLife Financial Services Occupation Field Service Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 10 / 2008
Transaction ID: 7137017
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 112 / 134
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Cecilia H. Carlton

Mailing Address P. O. Box 636

City State Zip Code
Hazlehurst MS 39083-0636

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

Name of Employer Southern Farm Bureau Life Insurance
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
452.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7137062

Amount of Each Receipt this Period
42.50

B.

Full Name (Last, First, Middle Initial)
Mr. Troy J. Shreve

Mailing Address 7100 S 45th Street

City State Zip Code
Lincoln NE 68516-3016

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

Name of Employer Benefit Management
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7137082

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce C. Hendrickson

Mailing Address 305 11th Ave

City State Zip Code
Holdrege NE 68949-1723

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

Name of Employer The Principal Financial Group
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2008

Transaction ID: 7137084

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **584.50**

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 113 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Preston R. Speece

Mailing Address 14620 Fowler Ave

City State Zip Code
Omaha NE 68116

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

Name of Employer Occupation
Heritage Financial Services Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7137094

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. Nicholas John Stosic

Mailing Address 9820 Dixon Lane

City State Zip Code
Reno NV 89511-9455

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

Name of Employer Occupation
Farmers Insurance Group General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: 7137098

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Mr. Nathaniel N. Miller

Mailing Address 1 Birch St

City State Zip Code
Oneonta NY 13820-1701

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

Name of Employer Occupation
New Millenium Management Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2008

Transaction ID: 7137140

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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 114 / 134
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. James W. Oglesby		Date of Receipt	
	Mailing Address P. O. Box 1555		M M / D D / Y Y Y Y Y 0 8 / 1 0 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 7137142
	ENKA	NC	28728	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		143.00	
Name of Employer J.W. Oglesby & Associates		Occupation Senior Sales Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1254.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Casey Lou-Ann Kolar		Date of Receipt	
	Mailing Address PO Box 280		M M / D D / Y Y Y Y Y 0 8 / 1 0 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 7137156
	Currituck	NC	27929-0280	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		13.75	
Name of Employer Southern Farm Bureau Life Insurance		Occupation AGENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.50		

C.	Full Name (Last, First, Middle Initial) Mr. Mark B. Schwendeman		Date of Receipt	
	Mailing Address 427 4th St		M M / D D / Y Y Y Y Y 0 8 / 1 0 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 7137162
	Marietta	OH	45750-2004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer The Schwendeman Agency IN-C.		Occupation PRESIDENT\oWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	▶	186.75
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 115 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John A. Davidson

Mailing Address 1497 Rancho Lane

City State Zip Code
Thousand Oaks CA 91362-2651

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

Name of Employer Davidson Insurance & Financial Service Occupation President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 840.00

Date of Receipt

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

Transaction ID: 7137198

Amount of Each Receipt this Period
105.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen D. Estler

Mailing Address 2177 NE 63 St.

City State Zip Code
Fort Lauderdale FL 33308

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

Name of Employer Mass Mutual Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt

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

Transaction ID: 7137246

Amount of Each Receipt this Period
42.50

C. Full Name (Last, First, Middle Initial)
Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City State Zip Code
Sarasota FL 34241-9449

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

Name of Employer Rogers Benefit Group Occupation Regional Mgr.

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

Date of Receipt

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

Transaction ID: 7137264

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **197.50**

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 116 / 134
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

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

Name of Employer NAIFA Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 783.75

Date of Receipt 08 / 31 / 2008
Transaction ID: 7137941
Amount of Each Receipt this Period 52.25

B. Full Name (Last, First, Middle Initial)
Mr. T. Leslie Littleton

Mailing Address 1025 E. Austin

City Nacogdoches State TX Zip Code 75965-2964

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

Name of Employer Allstate Ins. Co Occupation PRINCIPAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt 08 / 31 / 2008
Transaction ID: 7137943
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City Washington State DC Zip Code 20001-5006

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

Name of Employer NAIFA Occupation Sr VP Law & Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.28

Date of Receipt 08 / 31 / 2008
Transaction ID: 7137959
Amount of Each Receipt this Period 20.83

SUBTOTAL of Receipts This Page (optional) ► 123.08

TOTAL This Period (last page this line number only) ► 34998.98

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 117 / 134

<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 Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) Dave Camp For Congress 2008</p> <p>Mailing Address 5915 Eastman Ave. Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. David Lee Camp</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04</p>	<p>Transaction ID: 7032677 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	0	8	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8	/	0	2	/	2	0	0	8													
2500.00																						
<p>B. Full Name (Last, First, Middle Initial) Levin For Congress</p> <p>Mailing Address PO Box 37</p> <p>City Roseville State MI Zip Code 48066</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Sander M. Levin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 12</p>	<p>Transaction ID: 7032678 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	0	8	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8	/	0	2	/	2	0	0	8													
2500.00																						
<p>C. Full Name (Last, First, Middle Initial) Friends Of Roy Blunt</p> <p>Mailing Address PO Box 50100</p> <p>City Springfield State MO Zip Code 65805</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Roy Blunt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 07</p>	<p>Transaction ID: 7032679 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	2	/	2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8	/	0	2	/	2	0	0	8													
5000.00																						

SUBTOTAL of Disbursements This Page (optional)	10000.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) Stupak For Congress</p> <p>Mailing Address 817 Ninth Avenue P.O. Box 156 PO Box 143</p> <p>City Menominee State MI Zip Code 49858</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Bart Stupak</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 01</p>	<p>Transaction ID: 7032680 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	8	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	0	8													
2500.00																						
<p>B. Full Name (Last, First, Middle Initial) Musgrave For Congress</p> <p>Mailing Address 257 Johnstown Center Drive #211</p> <p>City Johnstown State CO Zip Code 80534</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Marilyn N. Musgrave</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 04</p>	<p>Transaction ID: 7032681 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	8	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	0	8													
2500.00																						
<p>C. Full Name (Last, First, Middle Initial) Perlmutter For Congress</p> <p>Mailing Address 3440 Youngfield St #264</p> <p>City Wheat Ridge State CO Zip Code 80033</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Edwin Perlmutter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 07</p>	<p>Transaction ID: 7032682 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	8	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	0	8													
2500.00																						

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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Heller For Congress <hr/> Mailing Address 7840 Red Leaf Drive <hr/> City Las Vegas State NV Zip Code 89131 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Dean Heller <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7032683 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type

B. Full Name (Last, First, Middle Initial) Stephanie Tubbs Jones For Us Congress <hr/> Mailing Address 3729 Silsby Rd <hr/> City University Heights State OH Zip Code 44118 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Stephanie Tubbs Jones <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7032684 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type

C. Full Name (Last, First, Middle Initial) Boyd For Congress <hr/> Mailing Address P.O. Box 15703 <hr/> City Tallahassee State FL Zip Code 32317 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Allen Boyd <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7039018 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) Friends Of Cliff Stearns</p> <p>Mailing Address PO Box 308</p> <p>City Silver Springs State FL Zip Code 34489</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Clifford B. Stearns</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 06</p>	<p>Transaction ID: 7039020 Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Kendrick Meek Campaign For Congress</p> <p>Mailing Address 111 Nw 183rd Street Suite 325</p> <p>City Miami State FL Zip Code 33169</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Kendrick B. Meek</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 17</p>	<p>Transaction ID: 7039021 Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Cazayoux for Congress</p> <p>Mailing Address PO Box 3172</p> <p>City Baton Rouge State LA Zip Code 70821</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Donald J. Cazayoux</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District: 06</p>	<p>Transaction ID: 7039024 Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional)	10000.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Barney Frank For Congress Committee</p> <p>Mailing Address PO Box 260</p> <p>City Newtonville State MA Zip Code 02460</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Barney Frank</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District: 04</p>	<p>Transaction ID: 7039025</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">4000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	8	4000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	4		2	0	0	8													
4000.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ellison For Congress</p> <p>Mailing Address PO Box 6072</p> <p>City Minneapolis State MN Zip Code 55406</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Keith Ellison</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 05</p>	<p>Transaction ID: 7039026</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">4000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	8	4000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	4		2	0	0	8													
4000.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paul Hodes For Congress</p> <p>Mailing Address 26 South Main Street, #253</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Paul W. Hodes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District: 02</p>	<p>Transaction ID: 7039027</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	8	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	4		2	0	0	8													
1500.00																						

SUBTOTAL of Disbursements This Page (optional)	9500.00
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)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Pete King For Congress Committee

Mailing Address Post Office Box 1428

City State Zip Code
Seaford NY 11783

Purpose of Disbursement

Category/
Type

Candidate Name
Rep. Peter T. King

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: NY District: 03

Transaction ID: 7039028

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Committee To Elect Gary Ackerman

Mailing Address 100 Jericho Quadrangle
Suite 233

City State Zip Code
Jericho NY 11753

Purpose of Disbursement

Category/
Type

Candidate Name
Rep. Gary L. Ackerman

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: NY District: 05

Transaction ID: 7039029

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Meeks for Congress

Mailing Address 219-10 South Conduit Avenue

City State Zip Code
Springfield Garden NY 11413

Purpose of Disbursement

Category/
Type

Candidate Name
Gregory Meeks

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: NY District: 06

Transaction ID: 7039030

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)

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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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Committee To Re-Elect Ed Towns</p> <p>Mailing Address 438 Lewis Avenue</p> <p>City Brooklyn State NY Zip Code 11233</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Edolphus Towns</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7039031</p> <p>Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) John Hall For Congress</p> <p>Mailing Address PO Box 469</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. John Hall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7039032</p> <p>Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Arcuri For Congress</p> <p>Mailing Address P.O. Box 8508</p> <p>City Utica State NY Zip Code 13505</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Michael A. Arcuri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7039033</p> <p>Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Louise Slaughter Re-Election Committee

Mailing Address P.O. Box 730
C/O C. Bruce Lawrence

City Honeoye State NY Zip Code 14471

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Louise McIntosh Slaughter

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: NY District: 28

Transaction ID: 7039034

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

1500.00

B. Full Name (Last, First, Middle Initial)
Langevin For Congress

Mailing Address 181-A Knight St

City Warwick State RI Zip Code 02886

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. James R. Langevin

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: RI District: 02

Transaction ID: 7039035

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Blumenauer For Congress

Mailing Address 830 Ne Holladay Suite 105

City Portland State OR Zip Code 97232

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Earl Blumenauer

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: OR District: 03

Transaction ID: 7039042

Date of Disbursement

08 / 05 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) National Leadership PAC</p> <p>Mailing Address PO Box 5577</p> <p>City Manhattanville Sta State NY Zip Code 10027</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: 7039095 Date of Disbursement: 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Steve Austria For Congress</p> <p>Mailing Address 2537 Obetz Drive</p> <p>City Beavercreek State OH Zip Code 45434</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Mr. Steve Austria</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 07</p>	<p>Transaction ID: 7039564 Date of Disbursement: 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends Of Zach Wamp</p> <p>Mailing Address P.O. Box 24804 651 E. Fourth St. Suite 200</p> <p>City Chattanooga State TN Zip Code 37422</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Zach Wamp</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 03</p>	<p>Transaction ID: 7039565 Date of Disbursement: 08 / 06 / 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

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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Jim Risch For U S Senate Committee

Mailing Address 407 W Jefferson Street

City Boise State ID Zip Code 83702

Purpose of Disbursement

011
Category/
Type

Candidate Name
Mr. James Risch

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: ID District:

Transaction ID: 7079918

Date of Disbursement

08 / 18 / 2008

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Schultz Debbie Wasserman

Mailing Address 1071 Twin Branch Ln

City Weston State FL Zip Code 33326

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Debbie Wasserman-Schultz

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: FL District: 20

Transaction ID: 7080002

Date of Disbursement

08 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Committee To Re-Elect Artur Davis To Congress, The

Mailing Address PO Box 1845

City Birmingham State AL Zip Code 35201

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Artur Davis

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: AL District: 07

Transaction ID: 7080003

Date of Disbursement

08 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

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)

National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Chambliss For Senate <hr/> Mailing Address Post Office Box 12469 <hr/> City Atlanta State GA Zip Code 30355 <hr/> Purpose of Disbursement 011 Candidate Name Sen. Saxby Chambliss <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District:	Transaction ID: 7080004 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>
B.	Full Name (Last, First, Middle Initial) Hall For Congress Committee (Ralph Hall - Rockwall) <hr/> Mailing Address Post Office Box 711 <hr/> City Rockwall State TX Zip Code 75087 <hr/> Purpose of Disbursement 011 Candidate Name Rep. Ralph M. Hall <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 04	Transaction ID: 7080005 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>
C.	Full Name (Last, First, Middle Initial) Friends Of John Tanner <hr/> Mailing Address Post Office Box 1994 <hr/> City Union City State TN Zip Code 38281 <hr/> Purpose of Disbursement 011 Candidate Name Rep. John S. Tanner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 08	Transaction ID: 7080006 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">5000.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">10000.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Jeff Fortenberry For United States Congress

Mailing Address 1610 N Street

City Lincoln State NE Zip Code 68508

Purpose of Disbursement

Category/
Type

Candidate Name
Rep. Jeffrey Fortenberry

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: NE District: 01

Transaction ID: 7080007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Stivers For Congress

Mailing Address 81 S Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Category/
Type

Candidate Name
Mr. Steve Stivers

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: OH District: 15

Transaction ID: 7080008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Peter Hoekstra For Congress

Mailing Address 1454 Cimarron Drive

City Holland State MI Zip Code 49423

Purpose of Disbursement

Category/
Type

Candidate Name
Rep. Peter Hoekstra

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: MI District: 02

Transaction ID: 7080306

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 Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) Mel Watt For Congress Committee</p> <p>Mailing Address PO Box 36831</p> <p>City Charlotte State NC Zip Code 28236</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Melvin L. Watt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7080307 Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Myrick For Congress</p> <p>Mailing Address PO Box 37091</p> <p>City Charlotte State NC Zip Code 28237</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Sue Myrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC 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: 7080308 Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Tom Feeney For Congress</p> <p>Mailing Address P. O. Box 622345</p> <p>City Oviedo State FL Zip Code 32762</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Tom Feeney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7080309 Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional)	9500.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Rodney Alexander For Congress Inc. <hr/> Mailing Address PO Box 367 319 Nancy Road <hr/> City Quitman State LA Zip Code 71268 <hr/> Purpose of Disbursement	Transaction ID: 7080310 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
Candidate Name Rep. Rodney Alexander <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 05 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

B. Full Name (Last, First, Middle Initial) Hayes For Congress <hr/> Mailing Address Post Office Box 2000 <hr/> City Concord State NC Zip Code 28026 <hr/> Purpose of Disbursement	Transaction ID: 7080311 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Robin C. Hayes <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

C. Full Name (Last, First, Middle Initial) Castle Campaign Fund <hr/> Mailing Address PO Box 133 <hr/> City Wilmington State DE Zip Code 19899 <hr/> Purpose of Disbursement	Transaction ID: 7080820 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
Candidate Name Rep. Michael N. Castle <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 01 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty)

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 Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen	Transaction ID: 7080822 Date of Disbursement 08 / 20 / 2008
	Mailing Address P.O. Box 44369 250 Prairie Center Drive	Amount of Each Disbursement this Period 3000.00
	City Eden Prairie State MN Zip Code 55344	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. Erik Paulsen	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pallone For Congress	Transaction ID: 7080823 Date of Disbursement 08 / 20 / 2008
	Mailing Address PO Box 3176	Amount of Each Disbursement this Period 2500.00
	City Long Branch State NJ Zip Code 07740	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Frank Pallone, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mike Rogers For Congress	Transaction ID: 7080824 Date of Disbursement 08 / 20 / 2008
	Mailing Address 123 East 13th Street	Amount of Each Disbursement this Period 1000.00
	City Anniston State AL Zip Code 36201	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Michael D. Rogers	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6500.00
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

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 Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

John Kerry For Senate

Mailing Address 10 G Street Ne
Suite 710

City Washington State DC Zip Code 20002

Purpose of Disbursement

011
Category/
Type

Candidate Name
Sen. John F. Kerry

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MA District:

Transaction ID: 7082351

Date of Disbursement

08 / 21 / 2008

Amount of Each Disbursement this Period

4000.00

B.

Full Name (Last, First, Middle Initial)

David Scott For Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. David A. Scott

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: GA District: 13

Transaction ID: 7089342

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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

122000.00

**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 133 / 134

<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 Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Wachovia <hr/> Mailing Address P.O. box 40031 <hr/> City Roanoke State VA Zip Code 24022-0031 <hr/> Purpose of Disbursement bank fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7142475 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 3037.05
	Category/Type 001
	bank fees
B. Full Name (Last, First, Middle Initial) NAIFA <hr/> Mailing Address 2901 Telestar Ct <hr/> City Falls Church State VA Zip Code 22042 <hr/> Purpose of Disbursement Payroll, Benefits, Supplies, Copies, etc Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7142477 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 22401.75
	Category/Type 001
	Payroll, Benefits, Supplies, Copies, etc

SUBTOTAL of Disbursements This Page (optional) ►

25438.80

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

25438.80

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 134 / 134
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Association of Insurance and Financial Advisors Political Action Comm	Nature of Debt (Purpose): Payroll, Benefits, Suppl- es, Copies, etc
Mailing Address 2901 Telestar Court	
City State ZIP Code Falls Church VA 22042	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 200px; margin: 0 auto; text-align: center;">36617.00</div>	Transaction ID: 7142493
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 200px; margin: 0 auto; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 200px; margin: 0 auto; text-align: center;">22401.75</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 200px; margin: 0 auto; text-align: center;">14215.25</div>	

1) SUBTOTALS This Period This Page (optional).....	▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto; text-align: center;">14215.25</div>
2) TOTALS This Period (last page this line number only).....	▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto; text-align: center;">14215.25</div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto; text-align: center;">0.00</div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto; text-align: center;">14215.25</div>