

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
 Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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		27937.93
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	14168.93									
(c) Total Receipts (from Line 19)	17985.26	32371.26								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	32154.19	60309.19								
7. Total Disbursements (from Line 31)	0.00	28155.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32154.19	32154.19								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
 999 E street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	12925.00	16340.00
(i) Itemized (use Schedule A)	5060.26	16031.26
(ii) Unitemized	17985.26	32371.26
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17985.26	32371.26
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))	17985.26	32371.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17985.26	32371.26

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)	0.00	0.00
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	28030.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	125.00
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))..	0.00	28155.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	28155.00

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)	17985.26	32371.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17985.26	32371.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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 / 18
	<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.	Full Name (Last, First, Middle Initial) Robert J. Ablon		Date of Receipt
	Mailing Address 5848 Ocean View Dr.		<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Oakland	CA	94618-1535
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.7962
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
Name of Employer New Passage		Occupation Writer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="210.00"/>

B.	Full Name (Last, First, Middle Initial) Robert J. Ablon		Date of Receipt
	Mailing Address 5848 Ocean View Dr.		<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Oakland	CA	94618-1535
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.7961
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
Name of Employer New Passage		Occupation Writer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="240.00"/>

C.	Full Name (Last, First, Middle Initial) Robert J. Ablon		Date of Receipt
	Mailing Address 5848 Ocean View Dr.		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Oakland	CA	94618-1535
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.7960
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
Name of Employer New Passage		Occupation Writer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="270.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="90.00"/>
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: PAGE 7 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A. Full Name (Last, First, Middle Initial)
Mett B. Ausley

Mailing Address 3412 Waccamaw Shores Rd.

City State Zip Code
 Lake Waccamaw NC 28450-9442

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Cyprus Pathology Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
07 / 22 / 2008

Transaction ID: SA11AI.7968

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mett B. Ausley

Mailing Address 3412 Waccamaw Shores Rd.

City State Zip Code
 Lake Waccamaw NC 28450-9442

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Cyprus Pathology Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 22 / 2008

Transaction ID: SA11AI.7967

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Mett B. Ausley

Mailing Address 3412 Waccamaw Shores Rd.

City State Zip Code
 Lake Waccamaw NC 28450-9442

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Cyprus Pathology Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
09 / 22 / 2008

Transaction ID: SA11AI.7966

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) 375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 18
(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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial) Marc Bejarano		Date of Receipt <table border="1" style="font-size: small;"> <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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	5		2	0	0	8													
Mailing Address 190 North St. # 2		Transaction ID: SA11AI.7974																				
City Somerville	State MA	Zip Code 02144-1153																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>50.00</td></tr> </table>	50.00																			
50.00																						
Name of Employer OpenWave Systems, Inc.	Occupation information technology (IT)																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>	300.00																				
300.00																						

B.

Full Name (Last, First, Middle Initial) Marc Bejarano		Date of Receipt <table border="1" style="font-size: small;"> <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>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	5		2	0	0	8													
Mailing Address 190 North St. # 2		Transaction ID: SA11AI.7975																				
City Somerville	State MA	Zip Code 02144-1153																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>50.00</td></tr> </table>	50.00																			
50.00																						
Name of Employer OpenWave Systems, Inc.	Occupation information technology (IT)																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>350.00</td></tr> </table>	350.00																				
350.00																						

C.

Full Name (Last, First, Middle Initial) James H. Cook		Date of Receipt <table border="1" style="font-size: small;"> <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>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	2		2	0	0	8													
Mailing Address 43 Musconetcong River Rd.		Transaction ID: SA11AI.8007																				
City Hampton	State NJ	Zip Code 08827-3021																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>50.00</td></tr> </table>	50.00																			
50.00																						
Name of Employer James H. Cook	Occupation Public Interest Consultant																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>600.00</td></tr> </table>	600.00																				
600.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>150.00</td></tr></table>	150.00
150.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 18
(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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial) James H. Cook		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 43 Musconetcong River Rd.		Transaction ID: SA11AI.8006
City Hampton	State NJ	Zip Code 08827-3021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer James H. Cook	Occupation Public Interest Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

B.

Full Name (Last, First, Middle Initial) James H. Cook		Date of Receipt MM / DD / YYYY 09 / 29 / 2008
Mailing Address 43 Musconetcong River Rd.		Transaction ID: SA11AI.8008
City Hampton	State NJ	Zip Code 08827-3021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer James H. Cook	Occupation Public Interest Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	

C.

Full Name (Last, First, Middle Initial) James F. Ferguson		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
Mailing Address 1917 W. Schiller St. Apt. 1		Transaction ID: SA11AI.8036
City Chicago	State IL	Zip Code 60622-1913
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Ferguson Production	Occupation Stock Broker/Investment Advisor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	660.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 18
(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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)
Ted Kerkelis

Mailing Address 1943 Howard Ave.

City San Diego State CA Zip Code 92104-1001

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

Name of Employer EJungle Corp. Occupation programmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2008
Transaction ID: SA11AI.8085
Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Ann Edwards Lee

Mailing Address 6103 S. Braeswood Blvd.

City Houston State TX Zip Code 77096-3713

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

Name of Employer none Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2008
Transaction ID: SA11AI.8099
Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Adam J. Lewis

Mailing Address 517 W. North St.

City Aspen State CO Zip Code 81611-1252

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

Name of Employer Sustainable Settings Occupation Chairman of the board

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 18 / 2008
Transaction ID: SA11AI.8104
Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5050.00

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 11 / 18
	<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.	Full Name (Last, First, Middle Initial) Jonathan Lewis		Date of Receipt MM / DD / YYYY 09 / 23 / 2008		
	Mailing Address 4649 Ponce De Leon Blvd ste 304		Transaction ID: SA11AI.8105		
	City coral gables	State FL	Zip Code 33146	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Jonathan Lewis and Associates		Occupation President		
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

B.	Full Name (Last, First, Middle Initial) Claudia Little		Date of Receipt MM / DD / YYYY 09 / 22 / 2008		
	Mailing Address 4426 Adair St.,		Transaction ID: SA11AI.8109		
	City San Diego	State CA	Zip Code 92107	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer retired		Occupation former registered nurse		
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		

C.	Full Name (Last, First, Middle Initial) Donald L. McMahon		Date of Receipt MM / DD / YYYY 09 / 29 / 2008		
	Mailing Address 19495 Nelson Rd.		Transaction ID: SA11AI.8137		
	City Saint Charles	State MI	Zip Code 48655-8750	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer none		Occupation retired military		
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional)	▶	5050.00
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 12 / 18
	(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)
 Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.	Full Name (Last, First, Middle Initial) Michael Newman		Date of Receipt MM / DD / YYYY 07 / 22 / 2008		
	Mailing Address 27141 Lerma		Transaction ID: SA11AI.8146		
	City Mission Viejo	State CA	Zip Code 92691-2103	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Newman Health Services, Inc.		Occupation hearing instrument specialist		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

B.	Full Name (Last, First, Middle Initial) Michael Newman		Date of Receipt MM / DD / YYYY 08 / 22 / 2008		
	Mailing Address 27141 Lerma		Transaction ID: SA11AI.8148		
	City Mission Viejo	State CA	Zip Code 92691-2103	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Newman Health Services, Inc.		Occupation hearing instrument specialist		
Receipt For: 2008 <input checked="" 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) Michael Newman		Date of Receipt MM / DD / YYYY 09 / 22 / 2008		
	Mailing Address 27141 Lerma		Transaction ID: SA11AI.8147		
	City Mission Viejo	State CA	Zip Code 92691-2103	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Newman Health Services, Inc.		Occupation hearing instrument specialist		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 18

(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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

Theodore A. Peck

Mailing Address 3 Traymore St.

City State Zip Code
Cambridge MA 02140-2213

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

Name of Employer Occupation
InterSystems Corp IT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: SA11AI.8170

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Theodore W. Pietras

Mailing Address 53 Union Park

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation
Self employed Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: SA11AI.8288

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Tony B. Rodriguez

Mailing Address P.O. Box 797723

City State Zip Code
Dallas TX 75379-7723

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: SA11AI.8191

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

790.00

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 / 18
	(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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.	Full Name (Last, First, Middle Initial) Robert A. Shinstrom		Date of Receipt
	Mailing Address P.O. Box 2845		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Kirkland	WA	98083-2845
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self-employed		Occupation	Transaction ID: SA11AI.8202
self-employed		locksmith	
Receipt For: 2008		Aggregate Year-to-Date	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="700.00"/>	<input type="text" value="100.00"/>
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Robert A. Shinstrom		Date of Receipt
	Mailing Address P.O. Box 2845		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Kirkland	WA	98083-2845
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self-employed		Occupation	Transaction ID: SA11AI.8203
self-employed		locksmith	
Receipt For: 2008		Aggregate Year-to-Date	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="800.00"/>	<input type="text" value="100.00"/>
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Robert A. Shinstrom		Date of Receipt
	Mailing Address P.O. Box 2845		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Kirkland	WA	98083-2845
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self-employed		Occupation	Transaction ID: SA11AI.8201
self-employed		locksmith	
Receipt For: 2008		Aggregate Year-to-Date	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="900.00"/>	<input type="text" value="100.00"/>
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="300.00"/>
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: PAGE 15 / 18

(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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

Michael Stearns

Mailing Address 3240 Peralta St. Apt. 9

City State Zip Code
Oakland CA 94608-4130

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

MM / DD / YYYY
07 / 22 / 2008

Transaction ID: SA11AI.8214

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Michael Stearns

Mailing Address 3240 Peralta St. Apt. 9

City State Zip Code
Oakland CA 94608-4130

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

MM / DD / YYYY
08 / 22 / 2008

Transaction ID: SA11AI.8216

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Michael Stearns

Mailing Address 3240 Peralta St. Apt. 9

City State Zip Code
Oakland CA 94608-4130

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2008

Transaction ID: SA11AI.8215

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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 16 / 18
	<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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.	Full Name (Last, First, Middle Initial) William M. Waring		Date of Receipt
	Mailing Address 152 Berrywood Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 22 / 2008
	City	State	Zip Code
	Severna Park	MD	21146-2032
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8250
Name of Employer self-employed		Occupation	Amount of Each Receipt this Period
self-employed		database designer	<input type="text"/> 20.00
Receipt For: 2008		Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 210.00	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) William M. Waring		Date of Receipt
	Mailing Address 152 Berrywood Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2008
	City	State	Zip Code
	Severna Park	MD	21146-2032
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8249
Name of Employer self-employed		Occupation	Amount of Each Receipt this Period
self-employed		database designer	<input type="text"/> 20.00
Receipt For: 2008		Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 230.00	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Wolfgang W. Wolf		Date of Receipt
	Mailing Address 2800 Grand Ave. S, Apt. 213		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 22 / 2008
	City	State	Zip Code
	Minneapolis	MN	55408-2228
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8276
Name of Employer		Occupation	Amount of Each Receipt this Period
Childrens Hospital & Clinics		registered nurse	<input type="text"/> 50.00
Receipt For: 2008		Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 350.00	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.00
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: PAGE 17 / 18	
	(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)
Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial) Wolfgang W. Wolf		Date of Receipt MM / DD / YYYY 08 / 22 / 2008
Mailing Address 2800 Grand Ave. S, Apt. 213		Transaction ID: SA11AI.8274
City Minneapolis	State MN	Zip Code 55408-2228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Childrens Hospital & Clin-ics	Occupation registered nurse	
Receipt For: 2008 <input checked="" 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) Wolfgang W. Wolf		Date of Receipt MM / DD / YYYY 09 / 22 / 2008
Mailing Address 2800 Grand Ave. S, Apt. 213		Transaction ID: SA11AI.8275
City Minneapolis	State MN	Zip Code 55408-2228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Childrens Hospital & Clin-ics	Occupation registered nurse	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	12925.00

**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 18 / 18

<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)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address P.O. Box 5864

City State Zip Code
Concord CA 94524

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 07

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.8292

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF RAHM EMANUEL

Mailing Address P.O. Box 101124

City State Zip Code
Chicago IL 60610

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IL District: 05

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.8291

Date of Disbursement

07 / 05 / 2008

Amount of Each Disbursement this Period

-1000.00

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

0.00