101965 00

FEC FORM 3X

NAME OF

July 31 Mid-Year

Year Only) (MY)

(TER)

Covering Period

Termination Report

Report (Non-election

REPORT OF RECEIPTS

For Other Than An Authorized Committee

TYPE OR PRINT ▼

30-Day

POST-Election

Report for the:

Election on

RECEIVED FEC MAIL CENTER

/*

12FE4M5

Runoff (30R)

Special (30S)

in the

State of

2008 JAN 30 AN 10: 56

Office Use Only

COMMITTEE (in full)	ove	r the lines.	2FE4M5	
LNDIANA CHAM	ABER CONGI	ZESSIONPL	- ACTION	
WIMMINE			<u> </u>	
ADDRESS (number and street)	D W NARKI	ngston St.	5TE	9005.
Check if different than previously	NAMINANIA		IN 4621	54
reported. (ACC)	ANIMAMONIS		14 144	
2. FEC IDENTIFICATION NUMBE	R ▼ CITY ▲	ST	ATE ▲ ZII	P CODE A
c 004 05597	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (b) (Choose One)) Monthly Feb 20 (M2) Report Feb 20 (M2) Due On:	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: [==] Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)	(C) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)				
January 31 Year-End Report (YE)	Election on	мм / в в / У	· s	tate of

Example: If typing, type

I certify that I have examined Type or Print Name of Treas	d this Report and to the best of my knowledge and belief it surer	t is true, co	prrect and comple	e.
Signature of Treasurer	Darle Barrett	Date	01/7	8 200

General (30G)

through

NOTE: SI	Jomission of Talse	e, erroneous, or	ncomplete information	n may subject the pe	rson signing this	Report to the	penalties of 2 U.S.C. §43	/g.
L	Office Use Only	}					FEC FORM 3X Rev. 12/2004	
FE6AN026	·						·	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2007 January 1, (b) Cash on Hand at Beginning of Reporting Period..... Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 7. Total Disbursements (from Line 31)......... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) 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



Report Covering the Period:

From:

To:

	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	ा च्याप्रकार माण्यस्य काता प्र कार १ वर्ग ६ ० वर्ग प्रकार १ ति र्	of the treatment of the control of t
	(i) Itemized (use Schedule A)		
	(ii) Unitemized(iii) TOTAL (add	Section and and the order of the following of the order o	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Lines 11(a)(i) and (ii)▶		
	(b) Political Party Committees(c) Other Political Committees		1
	(such as PACs)(d) Total Contributions (add Lines	i de Central de Carres de Central	
	11(a)(iii), (b), and (c)) (Carry	Activities are made and the contract μ_i	The second secon
	Totals to Line 33, page 5)▶	- Responding the temperature of the U.S.	i di maja ayan ayan ayan 🗸 🛴
12.	Transfers From Affiliated/Other	The respect of the section of the se	o de la companya della companya della companya de la companya della companya del
	Party Committees		
13.	All Loans Received	in the property of the control of th	the state of the s
		in European Chemical Contract Contract 🖊 🛊	an tanàna ao ao ao ao ao amin'ny ao amin'ny avon'ny taona ao amin'ny faritr'i Austriana ao ao amin'ny faritr'i
	Loan Repayments Received	. But the few side for the first of the	$oldsymbol{v}_{i}$, $oldsymbol{v}_{i}$, $oldsymbol{v}_{i}$, $oldsymbol{U}_{i}$,
15.	Offsets To Operating Expenditures		_
	(Refunds, Rebates, etc.)	The first transfer from the control of the control	
46	(Carry Totals to Line 37, page 5)	i di <u>di dina para di</u> parti di kacamatan kalamatan di kacamatan di ka	o franciska se programa i se objektiva se ob
10.	Refunds of Contributions Made to Federal Candidates and Other	•	
	Political Committees	The same of the sa	No. of the same state of the s
17	Other Federal Receipts	where the colorinal contains the problem that $oldsymbol{V}_{ij}$	The first of the control of the cont
17.	(Dividends, Interest, etc.)	Hamiltonia (St. Charles St. St. Charles St.	
18	Transfers from Non-Federal and Levin Fund	a terretarati sektrologica eta eta eta eta eta eta eta eta eta et	o korto di Bortinare di e Voltazion V i
10,	(a) Non-Federal Account	e. O North Jenos Pago Tomberto (1440) Surroyatta (1551 € 1460).	one of the control o
	(from Schedule H3)	N	<i>(</i> *)
	(non-conocon-no)	o di alterati effeto e effort effettello di e l V E. La romania	and the second s
	(b) Levin Funds (from Schedule H5)	Ŋ	
	(b) Lovin rando (nom conocalo rio)	in disputational production of the Control of the C	
	(c) Total Transfers (add 18(a) and 18(b))	· · · · · · · · · · · · · · · · · · ·	\mathbf{O}
		indraedu wa kamaran ing malab <mark>u</mark> ka. Tanggaran	, . , . ,
19.	Total Receipts (add Lines 11(d),	The state of the s	ne i pri pri ese i pri es vend en pre i kiri, e i 🍂 e i
	12, 13, 14, 15, 16, 17, and 18(c))▶	La chaedland i an dea Teachard arthur Uni	- North College (State State S
20.	Total Federal Receipts	gergensen, geogregeken ænte b	en engelige kan naman indahan kemilingan 🔌 .
	(subtract Line 18(c) from Line 19)▶		
		The state of the s	

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

ursements Page **4**

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	TOTAL THIS PERIOD	Calendar Year-to-Date
(i) Federal Share		
(ii) Non-Federal Share(b) Other Federal Operating		
Expenditures(c) Total Operating Expenditures	Now the control of the expression of the control of	
(add 21(a)(i), (a)(ii), and (b))		
23. Contributions to Federal Candidates/Committees	Landson has Providently by mile directions	
and Other Political Committees	The second secon	
(use Schedule E)	Secretaristics to the description of a section of the second of the seco	
		· · · · · · · · · · · · · · · · · · ·
26. Loan Repayments Made	The second of th	, , <u>(</u>)
Loans Made	Stranger of the second of the	, , , , , , , , , , , , , , , , , , ,
(b) Political Party Committees		
(d) Total Contribution Refunds	Secretarian de la composition della composition	 But the second Development of the Policy of t
(add Lines 28(a), (b), and (c))▶	in the second of	
29. Other Disbursements	1. La rice 70.00 Car 10.00	ω
30. Federal Election Activity (2 U.S.C. §431(20)(a) Allocated Federal Election Activity(from Schedule H6)) - pr esigning a per mortal en men tres tres telle Anno	and the second of the second o
(i) Federal Share		
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely With Federal Funds		0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	For the second transfer of the second second transfer of the second	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	6.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)▶	······································	6.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

111.	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans)	reserving section sections are progressively	
	(from Line 11(d), page 3)	and the same of th	
34.	Total Contribution Refunds		· 黄雄 27 8 8 7 4 8 8 7 4 8 8 7 9 7 9 7 9 8 8 8 8 8 8 8 8 8 8 8 8
	(from Line 28(d))	Angella de la companya de la Company	· · ·
35.	Net Contributions (other than loans)	Reserve and a second of the se	
	(subtract Line 34 from Line 33)	Same Secretary Company Complete State Read Complete	
36.	Total Federal Operating Expenditures	ട് അത് നെൽ നല 25 തൽക്കാ വിന പട്ട് 1 നമിച്ചാന് 1 നമ് 10 വല് സെൽ വാത്രയപ്പെട്ടാർ പ്രസ്ത സെന്റെ പ്രസ്തിച്ചാര് പ്രസ്തിവല്	
	(add Line 21(a)(i) and Line 21(b))▶	Complete the Marchaeller Borner and Complete Complete	. <u> </u>
37.	Offsets to Operating Expenditures	grander (grander state) et al far et	The state of the s
	(from Line 15, page 3)	the state of the s	
38.	Net Operating Expenditures	Business and the state of the s	· · · · · · · · · · · · · · · · · · ·
	(subtract Line 37 from Line 36)	Same Same Street Commercial Control of the Control	La

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than using	and Statements may not be sold or used by any p ng the name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	er of Commerce Com	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / O D / / Y V Ý Y
City	State Zip Code	The section of the se
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	7 2
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address	Mailing Address	
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
CUDTOTAL of Secretary Transport	-0	
SUBTUIAL OF Receipts This Page (option	al)	
TOTAL This Period (last page this line nu	mber only)	• • • • • • • • • • • • • • • • • • •

SCHEDULE B	(FEC	Form	3X)
ITEMIZED DISE	BURSE	MEN1	S

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
Any information copied from such Reports and State or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ments may not be sold or use me and address of any politic	al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Mailing Address	State Zip Code		Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disburse Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼	Category/ Type	Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement M M / D D / Y Y Y
Purpose of Disbursement Candidate Name	State Zip Code	Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement
Purpose of Disbursement Candidate Name	State Zip Code	Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	
TOTAL This Period (last page this line number only)	<u> </u>	<u> </u>

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE OF
FOR LINE 13 OF FORM 3X

Mailing Address	Primary General Other (specify) ▼
City State ZIP	Code
·,	Balance Outstanding at Close of This Period
TERMS Date Incurred Date D	Due Interest Rate Secured:
M M / D D / V V V V V V W W W W T / T D D D T /	A MAINAMAN SANAMAN AND THE COMMAND AND THE COM
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: - ' ' ' '
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: Control of the state of th
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
DTALS This Period This Page (optional)	

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for						
Information	fo	und on				
Page	of	Schedule	C			

Federal Election Commission, Washington, D.C. 20463

MAME OF COMMITTEE (In Full) Walder Chamber Cham	cssional Actio	rec identification number c 00405697
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name		AND A THE STREET STATE OF
		%
Mailing Address		TO THE TAX TO SELECT A STORY OF THE SECOND S
Trialing Tradition	Date Incurred or Established	
City State Zip Code	Date Due	м м / р р / у у у у .
A. Has loan been restructured? No Yes	If yes, date originally incurred	м м. / р р. / "А. А. А. Д
B. If line of credit, Amount of this Draw:	- Outstanding	
C. Are other parties secondarily liable for the debt incurre		
ATTITUDE CONTRACTOR OF THE PROPERTY OF THE PRO	ust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the I property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other No Yes If yes, specify:	deposit, chattel papers, similar traditional collateral?	What is the value of this collateral?
		interest in it? No Yes
E. Are any future contributions or future receipts of intere collateral for the loan? No Yes If yes, s	specify:	What is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
M · M · / Divido · / · · · · · · · · · · · · · · · · ·	City, State, Zip:	
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan	s pledged for this loan, or if the a was made and the basis on whi	amount pledged does not equal or exceed ch it assures repayment.
G. COMMITTEE TREASURER		DATE
Typed Name		M W / D D / V Y Y Y
Signature		and the second second second
H. Attach a signed copy of the loan agreement.	_ 	
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the teare accurate as stated above. The loan was made on terms and conditions (incoming similar extensions of credit to other borrowers of III. This institution is aware of the requirement that a	cluding interest rate) no more fav comparable credit worthiness. a loan must be made on a basis	vorable at the time than those imposed for which assures repayment, and has
complied with the requirements set forth at 11 C	FH 100.82 and 100.142 in makin	*************************************
Typed Name		DATE
Signature Titl	le	M M / D / Y Y Y
		1

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE
FOR LINE NUMBER:
(check only one)

9

OF

	Ma Mamber	amarasional f	tction Committee
A. Full I	Name (Last, First, Middle Initial) of Deb		Nature of Debt (Purpose):
Mailing A	ddress		
City	State	Zip Code	
Outsta	nding Balance Beginning This Period		······································
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Perio
	المستعرف في المستعرف المستعرف	The second retrieve batteries of the	
B. Full N	ame (Last, First, Middle Initial) of Debt	or or Creditor	Nature of Debt (Purpose):
Mailing A	ddress		
City	State	Zip Code	
Outsta	nding Balance Beginning This Period	<u> </u>	
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Perio
	The state of the s	The control of the majority of the second of	The same of the sa
C. Full 1	Name (Last, First, Middle Initial) of Deb	otor or Creditor	Nature of Debt (Purpose):
Mailing A	ddress		
City		State Zip Code	
Outsta	nding Balance Beginning This Period		
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Perio
	r (harinetarre	Appendix of the major of the state of the state of	As not seen a grown as a second
SUBTO	FALS This Period This Page (optional).	>	and the first of the first of the second of
TOTALS	This Period (last page this line numb	er only)	
TOTAL	OUTSTANDING LOANS from Scheduk	e C (last page only)	, ,
ADD 2)	and 3) and carry forward to appropriat	te line of Summary Page (last page only) ▶	,

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAG	iΕ	OI	=
FOF	LINE	24 OF	FORM 3X

		TON LINE 24 OF TONING 3X
MAI OF COMMITTEE (INFUII) MAI OF COMMITTEE (INFUII) MAI OF COMMITTEE (INFUII)	essimal A	FEC IDENTIFICATION NUMBER V
Check if 24-hour notice 48-hour notice	()	$M_{\rm M}$
Full Name (Last, First, Middle Initial) of Payee		Date
		M - M - / - D - D - / Y - Y - Y - Y
Mailing Address		
		Amount
City State	Zip Code	विकास क्षेत्रका प्राप्त । १८८० मा । १८८० मा । १८८७
		a shieniani se nazme no se ek
Purpose of Expenditure	Category/	Office Sought: House State:
	Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expend		President
		Check One: Support Oppose
Calendar Year-To-Date Per Election	the same of the sa	Disbursement For: Primary General
for Office Sought	on Alexander of the Co. L	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		
Full Name (Last, First, Middle Initial) of Payee		Date
		M M / O O / Y Y Y Y
Mailing Address		A state of the sta
		Amount
City State	Zip Code	The state of the s
Purpose of Expenditure	Category/	Office Sought: House State:
	Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expend	liture:	President
		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	to motor common participation of the state o	Disbursement For: Primary General Other (specify)
		in the second of
(a) SUBTOTAL of Itemized Independent Expenditures		• 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		ang ang kalono lebih linga linga lebih ber
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		▶ 1.30 • 1.00
Under penalty of perjury I certify that the independent expendit with, or at the request or suggestion of, any candidate or autho party committee) any political party committee or its agent.		
		ing same y includes a company of the
	Date	「A(AT)/,D)「b・/ Y U Y U Y U Y U Y U Y U Y U Y U Y U Y
Signature		and the same of the same of the same

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

PAGE OF (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTER Up Full) Check if 24-hour notice Has your committee been designated to make coordinated expenditures by a political party committee? YES NO. If YES, name the designating committee: Mailing Address City State ZIP Code Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate ing (2 U.S.C. §441a(i)/441a-1) Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential | 197 Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate HORSE PRESENT OF THE PARTY OF A LABOUR TANKS AS A SECOND ing (2 U.S.C. §441a(i)/441a-1) Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City Zip Code State Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential . . . Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate > ing (2 U.S.C. §441a(i)/441a-1) SUBTOTAL of Expenditures This Page (optional)..... TOTAL This Period (last page this line number only)......

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Indiana Chamber Unavessional Action Committee
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal%
Nonfederal%
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

2803961015

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE	OF

NAME OF COM	MITTEE PAR Full) MOEY	Comaressional	Action Committee
			· · · · · · · · · · · · · · · · · · ·

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

are allocated using a time-space metricu.	,	
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Candidate Support	% [. %
CHECK IF THE RATIO IS:	' ' '	
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		1.171
Fundraising Direct Candidate Support	%	. %
CHECK IF THE RATIO IS:		•
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Candidate Support		. %
CHECK IF THE RATIO IS:		
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Candidate Support	%	. %
CHECK IF THE RATIO IS:	' '	•
New Revised Same as Previously Reported]	
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
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ACTIVITY IS:		.15 111
Fundraising Direct Candidate Support	%	- %
CHECK IF THE RATIO IS:	`	,,
New Revised Same as Previously Reported		

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	0	F _		
FOR LIN	F 18a	OF	FORM	3X

AME C	I and hamper	amaresional Ac	than Committee
NAM	E OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
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BRE	AKDOWN OF TRANSFER RECEIVED		The standard Article States of the standard stan
h	Total Administrative		all the second of the second o
			programme and the second
ii)	Generic Voter Drive		All managements of the second second second
iii)	Exempt Activities		original de la companya de la compa La companya de la co
iv)	Direct Fundralsing (List Activity or Event Iden	ntifier)	
1		$p(x,y) = (-1)^{\frac{1}{2}} \left(\frac{1}{2} \left(\frac{1}$	·.
	a)	official California (Section 1984)	# 4
		, which we have the second contract the second $({\bf p}_{ij})$, and	
	b)	Earling College Street College	Vermen versioner en versioner
	c) Total Amount Transferred For Direct Fundra		•
1	c) lotal Amount Transiened Por Direct Pundre	using	Figure 7—200 - \$7 in the control of
(v)	Direct Candidate Support (List Activity or Ev	ent Identifier)	
		\$ HER STEPPEN SOFTWARE OF THE UNITED THE FLUX	
'	a)	Associate grante consumer in the	ř.
		$\mathcal{L}_{\mathcal{A}}(x) = \mathcal{L}_{\mathcal{A}}(x) $	•
1	b)	Tend of the Product of Policy of the Profile	't '=
	A Total Assessed Total Condition	lata Command	gradus de la companya
l	c) Total Amount Transferred For Direct Candid	sate Support	 A series of the s
	Public Communications Deforming Only to	Bowley (Mada by PAC)	• •
Vij	Public Communications Referring Only to I		
	TOTALS FO	R BREAKDOWN OF TRANSFER RECEIVE	ED ,
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TOTAL	This Period (Generic Voter Drive)		•
· O · AL	The Follow (Golden Votes Billo)		
TOTAL	This Period (Exempt Activities)		
	, ,		raman a sa s
TOTAL	This Period (Direct Fundraising)		j. , , ,
	-		en e
TOTAL	This Period (Direct Candidate Support)		
			wakani wa katamanini ing
TOTAL	This Period (Public Communications Referring	Only to Party)	and multiple desperate to
			gradu a company and a company
TOTAL	This Period (Total Amount Transferred)		5

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SCHEDULE H4 (FEC Form 3X)

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DERAL/NONFEDERAL ACTIVI	TY		FOR LINE 21a OF FORM :
EIGF COMMITTEE (in Full) Will Name (Last, First, Middle Initial)	Umgression	ral Act	Allocated Activity or Event:
lailing Address			Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor
ity	State Zip Code		Public Comm (ref to party only) by PAC
urpose of Disbursement:		rævgundvilla a	Allocated Activity or Event Year-To-Date
ctivity or Event Identifier:		Category/ Type	Date
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
and the state of t			in the second se
ull Name (Last, First, Middle Initial)		 	Allocated Activity or Event:
			Administrative Fundraising Exemp
lailing Address			Voter Drive Direct Candidate Suppor
ity	State Zip Code		Public Comm (ref to party only) by PAC
urpose of Disbursement:		<u></u>	Allocated Activity or Event Year-To-Date
urpose of Disbursement.		17. 13. 14. 14. 1 1	
ctivity or Event Identifier:		Category/ Type	Date
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
e de la composition della comp	9 - 1		
ull Name (Last, First, Middle Initial)	Charlett and well and a	THE PARTY OF	Allocated Activity or Event:
		·	Administrative Fundraising Exemp
ailing Address			Voter Drive Direct Candidate Suppo
ity	State Zip Code		Public Comm (ref to party only) by PAC
umaca of Dishusament			Allocated Activity or Event Year-To-Date
urpose of Disbursement:		100 mm / 100	The state of the s
ctivity or Event Identifier:		Category/ Type	й'м / . в в / v' y y y Date
FEDERAL SHARE	+ NONFEDERAL		= TOTAL AMOUNT
			grant to the state of the state
TOTAL of Allocated Federal and NonFederal	Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

SHARE NONFEDERAL SHARE TOTAL AMOUNT

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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR **ALLOCATED FEDERAL ELECTION ACTIVITY**

o be used l	by State, District and Loca	Party Committees Only)	FOR LINE 18b OF FORM 3X
NAIA	MAITTEE IN Full)	Comaressional Pr	ition ammittee
NAME OF A	CCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
BREAKDOV	NN OF THIS TRANSFER	<u> </u>	
)	Voter Registration	VOTER REGISTR	원, 파일본 2014 年 학교 원
	Total Amount Transferred for Voter	Registration	Le certain d
li)	Voter ID	V(Company of the State of the	filme finantial filmatic serva. Ottek ID
	Total Amount Transferred for Voter	ID	Control Control
iii)	GOTV		GOTV
	Total Amount Transferred for GOT	/ ·	Oracles of the second
ivì	Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
	Total Amount Transferred for Gene	ric Campaign Activity	munas a compositor de composit
NAME OF A	CCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
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		The second second in the second second	The state of the s
BREAKDOV	WN OF THIS TRANSFER		
i)	Voter Registration	VOTER REGISTR	IATION
	Total Amount Transferred for Voter	5 mm (27 m) 2 m (27	
11)	Voter ID	the second of th	
ļ	Total Amount Transferred for Voter	ID	and the first that the second
	GOTV	j* + g + u ⁺⁺	GOTV
	Total Amount Transferred for GOT	V	rate of the second seco
lv)	Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
	Total Amount Transferred for Gene	ric Campaign Activity	State and Association (1995) to the months of
	TOTALS FOR BR	EAKDOWN OF TRANSFER RECEIVED (L	ast Page Only)
		er en	units in
TOTAL	L This Period (Voter Registration)		•
-	I This Desired Olegon ID		
IUIAI	L This Period (voter ID)	•	regression with the second
TOTAL	L This Period (GOTV)		:
	.,		 Fig. 1. Fig. 2. Fig. 2. Fig. 3. Fig. 3.
TOTAL	L This Period (Generic Campaign A	adia de la	en e
		·	in the contract of the contra
TOTAL	L This Period (Total Amount of Tran	sfers Received)	

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	OF		
FOR LINE	30a OF	FORM	ЗΧ

ndlana Chamber (Inaress	1010C1 -		
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address	 	Allocated Activity or Event Year-To-Date	
,			
City State Zip Code			
Purpose of Disbursement Category/ Type		Date '	
FEDERAL SHARE + LEVIN	SHARE	= TOTAL AMOUNT	
to the desire of	· Professional Profession		
B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City State Zip Code	1 - 274 1	- , , , , , , , , , , , , , , , , , , ,	
Purpose of Disbursement	Category/	Date	
FEDERAL SHARE + LEVIN			
FEDERAL SHARE + LEVIN SECTION OF A SECTION OF A SECTION OF THE SE		TOTAL AMOUNT	
l			
e de le encomposition de la composition della co		Type of Allocated Activity or Event: Voter Registration GOTV	
C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date	
C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address	4. \$ - 4.4.74 PT	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date	
C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement	Category/ Type SHARE	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date M M / j D D / Y Y Y Date TOTAL AMOUNT	
C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement FEDERAL SHARE + LEVIN	Category/ Type SHARE	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date J Date TOTAL AMOUNT	
C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement FEDERAL SHARE + LEVIN	Category/ Type SHARE	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date J Date TOTAL AMOUNT	
C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement FEDERAL SHARE + LEVIN	Category/ Type SHARE	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date M M / j D D / y y y Date TOTAL AMOUNT TOTAL AMOUNT	
C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement FEDERAL SHARE + LEVIN JBTOTAL of Shared Federal and Levin Activity This Page FEDERAL SHARE + LEVIN DTAL This Period (last page for each line only)(Federal share to 30(a)(i) FEDERAL SHARE	Category/ Type SHARE SHARE And Levin share to	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date J Date TOTAL AMOUNT TOTAL AMOUNT 30(a)(ii))	

SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE	(Mm)	oer Coma	ressional	Acton	ammittee
NAME OF ACCOUNT					

		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
	RECEIPTS FROM PERSONS		
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	(b) Unitemized	ing his The Committee Burn Space Committee Space (St. 1971) (1971)	na na unega en ∰arro desar# en
			THE STATE OF
	(c) Total	or the same and the state of the same of t	ing of the control of the state
	OTHER RECEIPTS		in the state of th
	TOTAL DECEMBED	Commission of the animal transfer by	nge personal and a state of the contract of th
•	TOTAL RECEIPTS(Add Lines 1c and 2)	ender og er ende skaller ende skaller er ende s Ende skaller er ende skaller e	man grant gr
	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration		
			• • • • • • • • • • • • • • • • • • •
	(b) Voter ID	 Questi medialexilitere il mustare il suori usmitau dillimi virra alle princa princapa di un appropriato il montre esperandi di princapa. 	Reflection of the second of th
	(c) GOTV	 (a) Let al. (D) a Property of the PD let all let all the PD let all	The content of the co
	(d) Generic Campaign	ender of the second of the sec	and the second s
	(e) Total	••••	·
		and the second s	
	OTHER DISBURSEMENTS		, ,
	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	uudi. Talaan aa ah	ing sa kalangan panggan di salah propinsi kalanggan penggan sa kalanggan penggan penggan penggan penggan penggan Penggan penggan pengga
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	SUBTOTAL	9	•
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	DISBURSEMENTS		
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•	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	Ilomano per toto too too objection (i)	The state of the s

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one)

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OF

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NAME OF COMMITTEE (In Full)	1 10
Full Name (Last, First, Middle Initial) / Full Organization Name	
. Puli Name (Last, First, Middle Illitial) / Full Organization Name	Date of Receipt
Mailing Address	
	Amount of Each Receipt this Period
City State Zip Code	
Name of Employer or Principal Place of Business	- : . , ,
	Aggregate Year-to-Date
Occupation	, , , , , , , , , , , , , , , , , , , ,
Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt
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Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt
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Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Receipt
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City State Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business	Aggregate Year-to-Date
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SUBTOTAL of Receipts This Page (optional)	<u>*</u>
TOTAL This Period (last page this line number only)	· · · · · · · · · · · · · · · · · · ·

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER:	PAC	ìΕ	OF
(check only one)	48		. 🗀 5
	4b	40	i

Any information copied from such Re or for commercial purposes, other th	eports and Statements may not be sold or used by a an using the name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	mber Congressiono	ul Action ammittee
Full Name (Last, First, Middle Init A.	ial) / Full Organization Name	Date of Disbursement
Mailing Address		
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Init B.	ial) / Full Organization Name	Date of Disbursement
Mailing Address		M IP / U / Y Y Y
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		- had 9 / 2 9
Full Name (Last, First, Middle Init C.	ial) / Full Organization Name	Date of Disbursement
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Full Name (Last, First, Middle Init D.	tial) / Full Organization Name	Date of Disbursement
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Purpose of Disbursement		The state of the s
SUBTOTAL of Disbursements This	Page (optional)	Process of the same transfer
TOTAL This Period (last page this	line number only)	

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): 1/29/08 Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED