

# 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  
CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO Box 66680  
 Check if different than previously reported. (ACC)  
Washington DC 20035

2. **FEC IDENTIFICATION NUMBER** C00375865  
**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 11 25 2008 through 12 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 Lee LaHaye

Signature of Treasurer Electronically Filed by Lee LaHaye Date 03 07 2009

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

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		29788.59
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	86177.76									
(c) Total Receipts (from Line 19) .....	9651.00	233937.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	95828.76	263725.77								
7. Total Disbursements (from Line 31) .....	47660.80	215557.81								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	48167.96	48167.96								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

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	2030.00	54975.00
(i) Itemized (use Schedule A) .....	7621.00	177592.42
(ii) Unitemized .....	9651.00	232567.42
(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) .....	9651.00	232567.42
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	1369.76
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)) .....	9651.00	233937.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9651.00	233937.18

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	47660.80	179890.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	47660.80	179890.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25338.00
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	25.00
(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	25.00
29. Other Disbursements.....	0.00	10304.26
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))..	47660.80	215557.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47660.80	215557.81

**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 .....	9651.00	232567.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9651.00	232542.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	47660.80	179890.55
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	1369.76
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	47660.80	178520.79

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

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

FOR LINE NUMBER: PAGE 6 / 23  
(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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Thelma Altis

Mailing Address 4250 Hamilton Creek Road

City Cabool State MO Zip Code 65689

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt MM / DD / YYYY  
12 / 10 / 2008

**Transaction ID:** SA11AI.33528

Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Betty Barnicle

Mailing Address 8431 W. Utopia Rd.

City Peoria State AZ Zip Code 85382

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt MM / DD / YYYY  
12 / 31 / 2008

**Transaction ID:** SA11AI.33488

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Lois Boso

Mailing Address 11496 duPont Road

City Washington State WV Zip Code 26181

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

Name of Employer Occupation  
retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
12 / 10 / 2008

**Transaction ID:** SA11AI.33429

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... 575.00

**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 7 / 23
	<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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) Patricia Campbell		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 4158 E Austin Lane		<b>Transaction ID:</b> SA11AI.33416		
	City Queen Creek	State AZ	Zip Code 85240	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Judson Cauthen		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 10916 Memory Lane		<b>Transaction ID:</b> SA11AI.33538		
	City Tavares	State FL	Zip Code 32778	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer self employed	Occupation real estate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 960.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Alice Daggett		Date of Receipt MM / DD / YYYY 12 / 03 / 2008		
	Mailing Address 3921 Thistle Ln.		<b>Transaction ID:</b> SA11AI.33392		
	City Ft. Worth	State TX	Zip Code 76109	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer none	Occupation housewife			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	55.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23  
(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)  
CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Alice Daggett

Mailing Address 3921 Thistle Ln.

City State Zip Code  
Ft. Worth TX 76109

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

Name of Employer none Occupation housewife

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.33393

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Gary Dodson

Mailing Address 2100 Wyckham Place

City State Zip Code  
Norman OK 73072

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

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

Transaction ID: SA11AI.33584

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Truman Draeger

Mailing Address 633 El Rancho Drive

City State Zip Code  
El Cajon CA 92019

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11AI.33271

Amount of Each Receipt this Period  
50.00

**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: PAGE 9 / 23  
(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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
John Erickson

Mailing Address 1420 S 29th Avenue

City State Zip Code  
Yakima WA 98902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2008

**Transaction ID:** SA11AI.33591

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Peggy Goode

Mailing Address 16015 Wildwood Lane

City State Zip Code  
Homer Glen IL 60491-6919

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
n/a homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
435.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 24 / 2008

**Transaction ID:** SA11AI.33483

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Doris Hendricks

Mailing Address 8810 Walther Blvd. Apt. 2229

City State Zip Code  
Parkville MD 21234

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
none Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 24 / 2008

**Transaction ID:** SA11AI.33391

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... 80.00

**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 10 / 23
	<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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) Danny Henry		Date of Receipt
	Mailing Address 366 Fork Lake Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Clinton	NC	28328
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33567
Name of Employer		Occupation	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"/> 300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Brian Jackson		Date of Receipt
	Mailing Address 7014 Shay Ct.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 0 8
	City	State	Zip Code
	Highland	CA	92346-7700
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33503
Name of Employer none		Occupation homemaker	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"/> 30.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Jean Jones		Date of Receipt
	Mailing Address 8945 Meadow Pines Cove		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Cordova	TN	38016-2439
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33428
Name of Employer		Occupation retired	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"/> 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>380.00</b>
<b>TOTAL</b> 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 11 / 23  
(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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
Margaret Knodol

Mailing Address 4418 108th Avenue E

City Edgewood State WA Zip Code 98372

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 10 / 2008  
**Transaction ID: SA11AI.33448**  
Amount of Each Receipt this Period: 25.00

**B.**

Full Name (Last, First, Middle Initial)  
Gary Martin

Mailing Address PO box 1672

City Platte City State MO Zip Code 64079

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 26 / 2008  
**Transaction ID: SA11AI.33340**  
Amount of Each Receipt this Period: 30.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary Martin

Mailing Address PO box 1672

City Platte City State MO Zip Code 64079

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 12 / 17 / 2008  
**Transaction ID: SA11AI.33339**  
Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **85.00**

**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 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
David Millet

Mailing Address 1000 So. Ervay St.

City State Zip Code  
 Dallas TX 75201

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

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

**Transaction ID:** SA11AI.33420

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph H. Moore

Mailing Address PO Box 5132

City State Zip Code  
 Sun City West AZ 85376

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

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

**Transaction ID:** SA11AI.33520

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
James O'Hern

Mailing Address 3642 Jody Nelson Drive Apt f18

City State Zip Code  
 Gulfport MS 39507

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 450.00

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

**Transaction ID:** SA11AI.33571

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **225.00**

**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 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Patti Perniciaro

Mailing Address 9872 SVL Box

City Victorville State CA Zip Code 92395

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

Name of Employer self employed Occupation gymnastics instructor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 03 / 2008  
**Transaction ID: SA11AI.33485**  
 Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Howard Riley

Mailing Address 190 W. Snodgrass Rd.

City Piqua State OH Zip Code 45356-9526

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

Name of Employer Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 12 / 31 / 2008  
**Transaction ID: SA11AI.33460**  
 Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
Paula Robinson

Mailing Address 5825 Winnbrook Court

City Roanoke State VA Zip Code 24018

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 31 / 2008  
**Transaction ID: SA11AI.33525**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00

**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 14 / 23
	<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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) Chester Sirois		Date of Receipt
	Mailing Address PO Box 458		<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 1 2 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Jonesboro	AR	72403
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33548
Name of Employer		Occupation	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"/> 50.00
		<input type="text"/> 230.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ruth Stapleton		Date of Receipt
	Mailing Address 5550 E. Camden St.		<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 1 2 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Tucson	AZ	85712-4214
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33394
Name of Employer n/a		Occupation housewife	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"/> 25.00
		<input type="text"/> 301.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ruth Stapleton		Date of Receipt
	Mailing Address 5550 E. Camden St.		<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 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Tucson	AZ	85712-4214
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33395
Name of Employer n/a		Occupation housewife	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"/> 25.00
		<input type="text"/> 326.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 100.00
<b>TOTAL</b> 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 15 / 23
	<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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

<b>A.</b>	Full Name (Last, First, Middle Initial) Flora Jane Towle		Date of Receipt
	Mailing Address 15 Appletree Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 6 / 2 0 0 8
	City	State	Zip Code
	Fairhaven	VT	05743-0000
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33523
Name of Employer		Occupation	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"/> 30.00
		<input type="text"/> 205.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Flora Jane Towle		Date of Receipt
	Mailing Address 15 Appletree Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Fairhaven	VT	05743-0000
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33522
Name of Employer		Occupation	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"/> 30.00
		<input type="text"/> 235.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara Towne		Date of Receipt
	Mailing Address 7650 Bayshore Drive #705		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Treasure Island	FL	33706
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.33382
Name of Employer none		Occupation homemaker	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"/> 50.00
		<input type="text"/> 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 110.00
<b>TOTAL</b> 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 16 / 23	
	(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"/> 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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial) Sondra Winborne	
Mailing Address P.O. Box 400	
City Missouri City	State Zip Code TX 77459-0400
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Mickey Winborne Refrigeration, Inc.	Occupation commercial refrigeratoion
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 8
Transaction ID: SA11AI.33468
Amount of Each Receipt this Period 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	25.00
<b>TOTAL</b> This Period (last page this line number only) .....	2030.00

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

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

FOR LINE NUMBER: (check only one)

<input 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)  
**CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Concerned Women for America Legislative Action Committee	Transaction ID: SB21B.33612 Date of Disbursement 12 / 01 / 2008
	Mailing Address 1015 15th Street, NW Suite 1100 City Washington State DC Zip Code 20005 Purpose of Disbursement Fundraising, Rent, Misc Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 18513.36	
Category/Type: 003	

<b>B.</b> Full Name (Last, First, Middle Initial) Concerned Women for America Legislative Action Committee	Transaction ID: SB21B.33618 Date of Disbursement 12 / 31 / 2008
	Mailing Address 1015 15th Street, NW Suite 1100 City Washington State DC Zip Code 20005 Purpose of Disbursement Fundraising, Rent, Misc Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 16682.13	
Category/Type: 003	

<b>C.</b> Full Name (Last, First, Middle Initial) DC Treasurer	Transaction ID: SB21B.33617 Date of Disbursement 12 / 19 / 2008
	Mailing Address 410 E St NW City Washington State DC Zip Code 20001 Purpose of Disbursement License Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 75.00	
Category/Type: 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	35270.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Master Print, Inc.  Mailing Address 8401 Terminal Road  City Newington State VA Zip Code 22122  Purpose of Disbursement Stationery printing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.33614 Date of Disbursement 12 / 15 / 2008  Amount of Each Disbursement this Period 5241.00  001 Category/Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Matrix Telecom  Mailing Address 201 Brookwood Rd.  City Atmore State AL Zip Code 36502  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.33622 Date of Disbursement 12 / 15 / 2008  Amount of Each Disbursement this Period 38.25  001 Category/Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Potentials Business Services  Mailing Address 12300 Anderson Ave.  City Fairfax State VA Zip Code 22030  Purpose of Disbursement Member Dbase Admin. and Member Newsletr Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.33615 Date of Disbursement 12 / 15 / 2008  Amount of Each Disbursement this Period 3469.50  001 Category/Type	

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

8748.75

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Saber Communications

Transaction ID: SB21B.33616

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Mailing Address 101 Washington St.

Amount of Each Disbursement this Period

1300.00
---------

City Falmouth State VA Zip Code 22405

Purpose of Disbursement website design/fundraising

001
-----

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Sheraton Crystal City

Transaction ID: SB21B.33620

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	8

Mailing Address 1800 Jefferson Davis Highway

Amount of Each Disbursement this Period

1834.00
---------

City Arlington State VA Zip Code 22202

Purpose of Disbursement reimb. for CWALAC reception

001
-----

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Sun Trust Bank

Transaction ID: SB21B.33610

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	8

Mailing Address PO Box 62227

Amount of Each Disbursement this Period

37.56
-------

City Orlando State FL Zip Code 32862

Purpose of Disbursement Bank fees

001
-----

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

3171.56
---------

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Sun Trust Bank	Transaction ID: SB21B.33611 Date of Disbursement																			
	Mailing Address PO Box 62227	<table border="1"><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>1</td><td>1</td><td>/</td><td>3</td><td>0</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	1	1	/	3	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	3	0	/	2	0	0	8												
	City Orlando State FL Zip Code 32862	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Misc Bank charges Candidate Name	<table border="1"><tr><td>423.63</td></tr></table>	423.63																		
423.63																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					

B.	Full Name (Last, First, Middle Initial) Sun Trust Bank	Transaction ID: SB21B.33613 Date of Disbursement																			
	Mailing Address PO Box 62227	<table border="1"><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>1</td><td>2</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	1	2	/	1	5	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	5	/	2	0	0	8												
	City Orlando State FL Zip Code 32862	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank fees Candidate Name	<table border="1"><tr><td>11.08</td></tr></table>	11.08																		
11.08																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					

C.	Full Name (Last, First, Middle Initial) Sun Trust Bank	Transaction ID: SB21B.33619 Date of Disbursement																			
	Mailing Address PO Box 62227	<table border="1"><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>1</td><td>2</td><td>/</td><td>3</td><td>1</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	1	2	/	3	1	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	1	/	2	0	0	8												
	City Orlando State FL Zip Code 32862	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Misc Bank charges Candidate Name	<table border="1"><tr><td>35.29</td></tr></table>	35.29																		
35.29																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>470.00</td></tr></table>	470.00
470.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>47660.80</td></tr></table>	47660.80
47660.80		

**Image# 29933096174**

Form/Schedule: **SB21B**

no candidate endorsed

Transaction ID: **SB21B.33612**

Form/Schedule: **SB21B**

no candidate endorsed

Transaction ID: **SB21B.33618**

\*\*\*\*\*

**Image# 29933096175**

Form/Schedule: **SB21B**

Transaction ID: **SB21B.33614**

no candidates endorsed

Form/Schedule: **SB21B**

Transaction ID: **SB21B.33615**

no candidates endorsed

\*\*\*\*\*

**Image# 29933096176**

Form/Schedule: **SB21B**

no candidates endorsed

Transaction ID: **SB21B.33616**

Form/Schedule: **SB21B**

no candidates endorsed

Transaction ID: **SB21B.33620**

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