

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Organization to Retain the Majority

ADDRESS (number and street) 603 Stewart Street #819
 Check if different than previously reported. (ACC)
Seattle WA 98101

2. **FEC IDENTIFICATION NUMBER** C00450700
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 09 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Philip E Lloyd

Signature of Treasurer Electronically Filed by Philip E Lloyd Date 10 16 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Organization to Retain the Majority

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		84321.24
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	133495.00									
(c) Total Receipts (from Line 19)	10890.00	138590.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	144385.00	222911.24								
7. Total Disbursements (from Line 31)	72986.50	151512.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	71398.50	71398.50								
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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
National Organization to Retain the Majority

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		
(i) Itemized (use Schedule A)	800.00	71900.00
(ii) Unitemized	90.00	190.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	890.00	72090.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	56500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	890.00	128590.00
12. Transfers From Affiliated/Other Party Committees	10000.00	10000.00
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))	10890.00	138590.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10890.00	138590.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	1436.50	18962.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1436.50	18962.74
22. Transfers to Affiliated/Other Party Committees.....	15000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	51500.00	112500.00
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.....	5050.00	5050.00
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))..	72986.50	151512.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72986.50	151512.74

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	890.00	128590.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	890.00	128590.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1436.50	18962.74
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1436.50	18962.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 21	
	(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

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

NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) Robert Brooks		Date of Receipt	
	Mailing Address 415 2nd Street NE Ste 100		M M / D D / Y Y Y Y 09 / 28 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.4644
	Washington	DC	20002	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		800.00	
Name of Employer Evergreen Associates		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 21
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/>	<input type="checkbox"/> 15
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 101 Constitution Ave. NW Suite 500 West		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20001
	FEC ID number of contributing federal political committee.		<input type="text" value="C00096156"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Transaction ID: SA12.4624 Amount of Each Receipt this Period <input type="text" value="5000.00"/>

B.	Full Name (Last, First, Middle Initial) UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 1401 I Street, NW Suite 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee.		<input type="text" value="C00035683"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Transaction ID: SA12.4643 Amount of Each Receipt this Period <input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10000.00"/>

**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)
National Organization to Retain the Majority

A. Full Name (Last, First, Middle Initial) HM & Co. <hr/> Mailing Address 1255 C Street SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Fundraising Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4719 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2010
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) Project Accounting Services <hr/> Mailing Address 603 Stewart Street #819 <hr/> City Seattle State WA Zip Code 98101 <hr/> Purpose of Disbursement Accounting/Compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4718 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2010
	Amount of Each Disbursement this Period 436.50

SUBTOTAL of Disbursements This Page (optional) ►

1436.50

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

1436.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.

Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Transaction ID: SB22.4694

Date of Disbursement

Mailing Address 430 South Capitol Street, SE
2nd Floor

/ /

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 10 / 21

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

<p>A. Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS</p> <p>Mailing Address 14 KNIGHTSWOOD DRIVE</p> <p>City MARLTON State NJ Zip Code 08053</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOHN H ADLER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4678</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) BEN CHANDLER FOR CONGRESS</p> <p>Mailing Address P. O. Box 12678</p> <p>City Lexington State KY Zip Code 40508</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name A.B. III CHANDLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4652</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS</p> <p>Mailing Address P.O. Box 15703 P.O. Box 15703</p> <p>City Tallahassee State FL Zip Code 32317</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4645</p> <p>Date of Disbursement 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

<p>A. Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS</p> <p>Mailing Address P.O. Box 15703 P.O. Box 15703</p> <p>City Tallahassee State FL Zip Code 32317</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name F. ALLEN JR. BOYD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4659 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) CHET EDWARDS FOR CONGRESS</p> <p>Mailing Address PO Box 23273</p> <p>City WACO State TX Zip Code 76702</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name CHET EDWARDS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4655 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) CIRO RODRIGUEZ FOR CONGRESS</p> <p>Mailing Address PO Box 14528</p> <p>City San Antonio State TX Zip Code 78214</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name CIRO D. RODRIGUEZ</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4663 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A. CITIZENS TO ELECT RICK LARSEN

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 326

City Everett State WA Zip Code 98206

Purpose of Disbursement Contribution

Candidate Name RICHARD RAY LARSEN

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: WA District: 02

Transaction ID: SB23.4702

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

5000.00

B. DEFAZIO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1316

City Springfield State OR Zip Code 97477

Purpose of Disbursement Contribution

Candidate Name PETER A. DEFAZIO

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: OR District: 04

Transaction ID: SB23.4699

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

2000.00

C. DRIEHAUS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 650 Fox Trails Way

City Cincinnati State OH Zip Code 45233

Purpose of Disbursement Contribution

Candidate Name STEVEN LEO DRIEHAUS

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.4715

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) FRIENDS OF GLENN NYE Mailing Address PO Box 68444 City Virginia Beach State VA Zip Code 23471 Purpose of Disbursement Contribution Candidate Name GLENN CARLYLE III NYE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4681 Date of Disbursement 09 / 20 / 2010	Amount of Each Disbursement this Period 2000.00
B.	Full Name (Last, First, Middle Initial) FRIENDS OF JANE HARMAN Mailing Address PO Box 96 City Torrance State CA Zip Code 90507 Purpose of Disbursement Contribution Candidate Name JANE HARMAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 36 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4675 Date of Disbursement 09 / 20 / 2010	Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) JIM COSTA FOR CONGRESS Mailing Address 2037 W Bullard Avenue # 355 City Fresno State CA Zip Code 93711 Purpose of Disbursement Contribution Candidate Name JIM MR. COSTA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4705 Date of Disbursement 09 / 30 / 2010	Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

<p>A. Full Name (Last, First, Middle Initial) JOHN SALAZAR FOR CONGRESS</p> <p>Mailing Address PO Box 534</p> <p>City Pueblo State CO Zip Code 81002</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name JOHN TONY MR. SALAZAR Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2010 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: CO District: 03</p>	<p>Transaction ID: SB23.4658</p> <p>Date of Disbursement <input type="text" value="09"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="2000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress</p> <p>Mailing Address PO Box 1045</p> <p>City Erie State PA Zip Code 16512</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name KATHLEEN DAHLKEMPER Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2010 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 03</p>	<p>Transaction ID: SB23.4708</p> <p>Date of Disbursement <input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) LINCOLN DAVIS FOR CONGRESS</p> <p>Mailing Address PO Box 350</p> <p>City Jamestown State TN Zip Code 38556</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name LINCOLN EDWARD DAVIS Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2010 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 04</p>	<p>Transaction ID: SB23.4660</p> <p>Date of Disbursement <input type="text" value="09"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="2000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) LOEBSACK FOR CONGRESS <hr/> Mailing Address PO Box 2720 <hr/> City Cedar Rapids State IA Zip Code 52406 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> <hr/> Candidate Name DAVID WAYNE LOEBSACK <input type="checkbox"/> Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2010 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ <hr/> State: IA District: 02	Transaction ID: SB23.4709 Date of Disbursement <input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
B.	Full Name (Last, First, Middle Initial) MARKEY FOR CONGRESS <hr/> Mailing Address PO Box 1333 <hr/> City Fort Collins State CO Zip Code 80521 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> <hr/> Candidate Name BETSY MARKEY <input type="checkbox"/> Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2010 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ <hr/> State: CO District: 04	Transaction ID: SB23.4690 Date of Disbursement <input type="text" value="09"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
C.	Full Name (Last, First, Middle Initial) MIKE MCMAHON FOR CONGRESS <hr/> Mailing Address 66 Arnold Street <hr/> City Staten Island State NY Zip Code 10301 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> <hr/> Candidate Name MICHAEL E. MR. MCMAHON <input type="checkbox"/> Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2010 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ <hr/> State: NY District: 13	Transaction ID: SB23.4686 Date of Disbursement <input type="text" value="09"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

<p>A. Full Name (Last, First, Middle Initial) PATRICK MURPHY FOR CONGRESS</p> <p>Mailing Address P.O. Box 868</p> <p>City Levittown State PA Zip Code 19058</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name PATRICK J MURPHY Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4666 Date of Disbursement: 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period <input type="text" value="2000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) PERLMUTTER FOR CONGRESS</p> <p>Mailing Address 3440 Youngfield Street #264</p> <p>City Wheat Ridge State CO Zip Code 80033</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name EDWIN G PERLMUTTER Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4687 Date of Disbursement: 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period <input type="text" value="2000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) PETERS FOR CONGRESS</p> <p>Mailing Address PO BOX 226</p> <p>City BLOOMFIELD HILLS State MI Zip Code 48303</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name GARY PETERS Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4696 Date of Disbursement: 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period <input type="text" value="2000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A. Full Name (Last, First, Middle Initial)
RUSH HOLT FOR CONGRESS

Mailing Address PO Box 782

City Pennington State NJ Zip Code 08534

Purpose of Disbursement
Contribution

Candidate Name
RUSH D. HOLT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NJ District: 12

Transaction ID: SB23.4712

Date of Disbursement

/

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
SANFORD D. BISHOP, JR. FOR CONGRESS

Mailing Address P. O. Box 909

City Columbus State GA Zip Code 31902

Purpose of Disbursement
Contribution

Candidate Name
SANFORD D JR. BISHOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: GA District: 02

Transaction ID: SB23.4649

Date of Disbursement

/

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
SCOTT MURPHY FOR CONGRESS

Mailing Address 5 South Side Dr. #224

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement
Contribution

Candidate Name
SCOTT M MURPHY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 20

Transaction ID: SB23.4672

Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) SPRATT FOR CONGRESS COMMITTEE			Transaction ID: SB23.4646	
	Mailing Address PO BOX 830			Date of Disbursement 09 / 20 / 2010	
	City YORK	State SC	Zip Code 29745	Amount of Each Disbursement this Period 2000.00	
	Purpose of Disbursement Contribution			Category/ Type	
	Candidate Name JOHN MCKEE JR HON SPRATT				
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State: SC		District: 05		

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

5150.00

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 19 / 21

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) Committee to Elect Fred Finn Mailing Address PO Box 458 City Belfair State WA Zip Code 98528 Purpose of Disbursement Contribution - Non-Federal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4728 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0 Amount of Each Disbursement this Period 800.00
B.	Full Name (Last, First, Middle Initial) Committee to Elect Sherry Appleton Mailing Address PO Box 2140 City Poulsbo State WA Zip Code 98370 Purpose of Disbursement Contribution - Non-Federal 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: SB29.4720 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0 Amount of Each Disbursement this Period 800.00
C.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Kathy Haigh Mailing Address 81 SE Walker Park Rd City Shelton State WA Zip Code 98584 Purpose of Disbursement Contribution - Non-Federal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4722 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0 Amount of Each Disbursement this Period 800.00

SUBTOTAL of Disbursements This Page (optional)	2400.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 21

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Tami Green	Transaction ID: SB29.4724 Date of Disbursement																			
	Mailing Address 7814 27th St W	<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>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
	City University Place State WA Zip Code 98466	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution - Non-Federal	<table border="1"> <tr> <td>800.00</td> </tr> </table>	800.00																		
800.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Connie Ladenburg Campaign Committee	Transaction ID: SB29.4732 Date of Disbursement																			
	Mailing Address PO Box 111928	<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>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	1	0												
	City Tacoma State WA Zip Code 98411	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution - Non-Federal	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																		
250.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Friends of Troy Kelley	Transaction ID: SB29.4726 Date of Disbursement																			
	Mailing Address 2521 Fremont St	<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>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
	City Tacoma State WA Zip Code 98406	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution - Non-Federal	<table border="1"> <tr> <td>800.00</td> </tr> </table>	800.00																		
800.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>1850.00</td> </tr> </table>	1850.00
1850.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Organization to Retain the Majority

A.

Full Name (Last, First, Middle Initial)
Tharinger for State Representative

Mailing Address PO Box 834

City State Zip Code
Sequim WA 98382

Purpose of Disbursement
Contribution - Non-Federal

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.4730

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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