

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Association of Insurance and Financial Advisors Political Action Committee

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

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

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

5. Covering Period 03 01 2006 through 03 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Peter C. Browne

Signature of Treasurer Electronically Filed by Peter C. Browne Date 04 12 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		537428.48
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	602773.08									
(c) Total Receipts (from Line 19)	77906.63	228895.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	680679.71	766323.56								
7. Total Disbursements (from Line 31)	201543.19	287187.04								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	479136.52	479136.52								
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)	24468.13									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	19489.00	50909.25
(i) Itemized (use Schedule A)	55917.63	175485.83
(ii) Unitemized	75406.63	226395.08
(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)	75406.63	226395.08
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	2500.00	2500.00
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))	77906.63	228895.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	77906.63	228895.08

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.....	50759.19	89102.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	50759.19	89102.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150750.00	197750.00
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	34.00	335.00
(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))	34.00	335.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	201543.19	287187.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	201543.19	287187.04

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)	75406.63	226395.08
34. Total Contribution Refunds (from Line 28(d))	34.00	335.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75372.63	226060.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	50759.19	89102.04
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50759.19	89102.04

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address PO Box 2205

City Avila Beach State CA Zip Code 93424-2205

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1606607

Amount of Each Receipt this Period
105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City Las Vegas State NV Zip Code 89130

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1604266

Amount of Each Receipt this Period
72.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr Emmette F. Albritton, II, LUTCF

Mailing Address Suite A
20683 Running Creek Church Road

City Stanfield State NC Zip Code 28163

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2006

Transaction ID: R1607857

Amount of Each Receipt this Period
220.00

Check

SUBTOTAL of Receipts This Page (optional)	397.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. John W. Allen, CLU, ChFC

Mailing Address 1310 E Ocean Blvd
Unit B14

City Long Beach State CA Zip Code 90802-6900

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2006

Transaction ID: R1607824

Amount of Each Receipt this Period
500.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mr. Thom E. Beasley

Mailing Address 1103 Dove Rd.

City Jonesboro State AR Zip Code 72401-5270

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606713

Amount of Each Receipt this Period
81.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Kent A. Bennett, LUTCF, CEP

Mailing Address 280 Hollow Road

City Muncy State PA Zip Code 17756

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607616

Amount of Each Receipt this Period
87.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	668.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Russell F. Bent

Mailing Address 94 Hastings Lane

City State Zip Code
Hainesport NJ 08036

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: R1608237

Amount of Each Receipt this Period
300.00

Check

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

Mailing Address 111 - 5th Ave SW PO Box 69

City State Zip Code
Epworth IA 52045

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2006

Transaction ID: R1607870

Amount of Each Receipt this Period
1050.00

Check

C. Full Name (Last, First, Middle Initial)
Mrs. Diane P. Blakeslee, CLU, CFP(r)

Mailing Address 88 Country Club Dr

City State Zip Code
San Luis Obispo CA 93401

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2006

Transaction ID: R1608153

Amount of Each Receipt this Period
250.00

Credit Card

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Ronald D. Brant, CLU, LUTCF

Mailing Address 10234 Hoffman

City State Zip Code
Maybee MI 48159-9777

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607366

Amount of Each Receipt this Period
105.00

Payroll Deduction

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

Mailing Address 5716 W. Orlando Circle

City State Zip Code
Broken Arrow OK 74011

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606846

Amount of Each Receipt this Period
60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Ms. Ellen E. Burmester, LUTCF

Mailing Address 9178 Rolling Tree Lane

City State Zip Code
Fair Oaks CA 95628

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2006

Transaction ID: R1608209

Amount of Each Receipt this Period
120.00

Check

SUBTOTAL of Receipts This Page (optional)	285.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Mark A. Chandik, CLU, ChFC

Mailing Address 42 Ritz Cove Drive

City Dana Point State CA Zip Code 92629

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2006

Transaction ID: R1605951

Amount of Each Receipt this Period
 208.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Alexander A. Chernoff

Mailing Address 351 Ridge Lane

City Mill Neck State NY Zip Code 11765-1201

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2006

Transaction ID: R1608184

Amount of Each Receipt this Period
 500.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Edward R. Clink

Mailing Address 1263 W. Square Lake Rd.

City Bloomfield Hills State MI Zip Code 48302-0845

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2006

Transaction ID: R1608244

Amount of Each Receipt this Period
 500.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	1208.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 141 Greenway Road

City State Zip Code
Lido Beach NY 11561-4828

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1607252

Amount of Each Receipt this Period
85.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Joseph L. Davis, CLU, ChFC

Mailing Address 1420 Primrose Road N.W.

City State Zip Code
Washington DC 20012-1224

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1607155

Amount of Each Receipt this Period
135.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. William H. Dodd, CLU

Mailing Address 8 St Clair Road

City State Zip Code
Morristown NJ 07960-7370

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2006

Transaction ID: R1607810

Amount of Each Receipt this Period
500.00

Credit Card

SUBTOTAL of Receipts This Page (optional)	720.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 50
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mrs. Deanna S. Dooley, LUTCF

Mailing Address 1567 Edmond Drive

City State Zip Code
San Carlos CA 94070-4235

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2006

Transaction ID: R1607807

Amount of Each Receipt this Period
500.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mr. Matthew Edelstein, CLU,ChFC

Mailing Address 34158 Lavender Circle

City State Zip Code
Grayslake IL 60030

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.50

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1604339

Amount of Each Receipt this Period
8.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Matthew Edelstein, CLU,ChFC

Mailing Address 34158 Lavender Circle

City State Zip Code
Grayslake IL 60030

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.50

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: R1608108

Amount of Each Receipt this Period
250.00

Check

SUBTOTAL of Receipts This Page (optional) ► **758.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 / 50
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mr. William J. Egan, III, CFP

Mailing Address 30 Garfield Ave

City Avon State NJ Zip Code 07717-1443

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	6

Transaction ID: R1608081

Amount of Each Receipt this Period
300.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. M. Jay Einstein, CLU

Mailing Address 59 Margarete Dr.

City Pittsgrove State NJ Zip Code 08318

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: R1606978

Amount of Each Receipt this Period
72.00

Payroll Deduction

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

Mailing Address 481 Route 82

City Oakdale State CT Zip Code 06370-1149

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: R1607016

Amount of Each Receipt this Period
105.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	477.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Fowler, CLU, LUTCF

Mailing Address 13243 S.E. 51st Place

City	State	Zip Code
Bellevue	WA	98006

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

Name of Employer Self-employed	Occupation Insurance Agent
-----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	6

Transaction ID: R1606786

Amount of Each Receipt this Period

107.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Peter Fulchiron, CLU, LUTCF

Mailing Address 411 San Andreas Drive

City	State	Zip Code
Novato	CA	94945-1237

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

Name of Employer Self-employed	Occupation Insurance Agent
-----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	6

Transaction ID: R1607623

Amount of Each Receipt this Period

208.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Colin M. Govan, CLU

Mailing Address 4106 Chippendale Court

City	State	Zip Code
Hampton	VA	23666-3602

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

Name of Employer Self-employed	Occupation Insurance Agent
-----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	6

Transaction ID: R1608253

Amount of Each Receipt this Period

305.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	620.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 20704 Meadow Ridge Dr.

City Springfield State NE Zip Code 68059

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1605686

Amount of Each Receipt this Period
208.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Robert J. Hollander, LUTCF

Mailing Address 904 Rockhurst Dr.

City Lincoln State NE Zip Code 68510-4114

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606222

Amount of Each Receipt this Period
105.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Douglas W. Johnson

Mailing Address 55000 Sunrise Ln.

City Mankato State MN Zip Code 56001-9240

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 07 / 2006

Transaction ID: R1607747

Amount of Each Receipt this Period
150.00

Check

SUBTOTAL of Receipts This Page (optional) ► 463.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 50
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Douglas W. Johnson

Mailing Address 55000 Sunrise Ln.

City State Zip Code
Mankato MN 56001-9240

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2006

Transaction ID: R1608066

Amount of Each Receipt this Period
100.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Terry M. Kaltenbach, CLU, ChFC

Mailing Address 1358 Ahlrich Ave

City State Zip Code
Encintas CA 92024-4029

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606814

Amount of Each Receipt this Period
125.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City State Zip Code
Falls Church VA 22042

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.75

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: R1608014

Amount of Each Receipt this Period
52.25

Check

SUBTOTAL of Receipts This Page (optional)	▶	277.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.75

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2006

Transaction ID: R1608262

Amount of Each Receipt this Period
52.25

Check

B. Full Name (Last, First, Middle Initial)
Mr. William Orié Knowlton, III,CSA

Mailing Address 911 11th Ave NW

City Fayette State AL Zip Code 35555-1442

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: R1608103

Amount of Each Receipt this Period
250.00

Check

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

Mailing Address 4632 Mountain Park Rd.

City Pocatello State ID Zip Code 83202

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

Name of Employer Self-employed Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607187

Amount of Each Receipt this Period
72.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	374.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1612 S. 152nd Street

City State Zip Code
Omaha NE 68144-5121

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1606629

Amount of Each Receipt this Period
75.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Paul A. LaPiana, CFP

Mailing Address 18 Mikro

City State Zip Code
Laguna Niguel CA 92677

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2006

Transaction ID: R1607953

Amount of Each Receipt this Period
500.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Philip E. Leberz

Mailing Address 477 Ninth Avenue Suite 106

City State Zip Code
San Mateo CA 94402-1854

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2006

Transaction ID: R1607772

Amount of Each Receipt this Period
2500.00

Check

SUBTOTAL of Receipts This Page (optional)	3075.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City State Zip Code
Flint MI 48532

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1607581

Amount of Each Receipt this Period
105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. George Winger McCloy, CLU

Mailing Address 921 Chatham Lane #300

City State Zip Code
Columbus OH 43221-2418

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2006

Transaction ID: R1608260

Amount of Each Receipt this Period
500.00

Check

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

Mailing Address 3273 Evergreen Road

City State Zip Code
Fargo ND 58102-1214

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: R1607547

Amount of Each Receipt this Period
72.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	677.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Albert Moriarty, CSA

Mailing Address 245 N 14th Street

City State Zip Code
Grover Beach CA 93433-2253

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: R1608012

Amount of Each Receipt this Period
250.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Warren K. Nelson, MA,LUTCF

Mailing Address 575 Lincoln Ave Suite 215

City State Zip Code
Napa CA 94558-3631

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 01 / 2006

Transaction ID: R1607644

Amount of Each Receipt this Period
500.00

Credit Card

C. Full Name (Last, First, Middle Initial)
Mr. James W. Oglesby, LUTCF

Mailing Address P. O. Box 7156

City State Zip Code
Asheville NC 28802-7156

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 429.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607383

Amount of Each Receipt this Period
143.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	893.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1837 Savannah

City State Zip Code
Ventura CA 93004-3112

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2006

Transaction ID: R1607867

Amount of Each Receipt this Period
250.00

Check

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

Mailing Address 5152 Ellington Court

City State Zip Code
Granite Bay CA 95746-7188

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606640

Amount of Each Receipt this Period
208.00

Payroll Deduction

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

Mailing Address 1287 Harrison Pond Drive

City State Zip Code
New Albany OH 43054

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606861

Amount of Each Receipt this Period
105.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	563.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Richard J. Rosenthal, LUTCF

Mailing Address 8912 SW 81 Terr

City State Zip Code
Miami FL 33173-4189

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2006

Transaction ID: R1608199

Amount of Each Receipt this Period
500.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. William R. Rowe, CLU, ChFC

Mailing Address 10201 S.W. 82 Court

City State Zip Code
Miami FL 33156

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 06 / 2006

Transaction ID: R1607743

Amount of Each Receipt this Period
150.00

Credit Card

C. Full Name (Last, First, Middle Initial)
Ms. Donna Saarem

Mailing Address 2886 Cedar Ridge Dr

City State Zip Code
Reno NV 89523

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2006

Transaction ID: R1608027

Amount of Each Receipt this Period
1500.00

Credit Card

SUBTOTAL of Receipts This Page (optional) ► **2150.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Scholz, CLU, ChFC

Mailing Address 1510 So. 183 Circle

City State Zip Code
Omaha NE 68130

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2006

Transaction ID: R1607777

Amount of Each Receipt this Period
261.50

Check

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

Mailing Address 1510 So. 183 Circle

City State Zip Code
Omaha NE 68130

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607396

Amount of Each Receipt this Period
62.50

Payroll Deduction

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

Mailing Address 22928 San Joaquin Drive East

City State Zip Code
Canyon Lake CA 92587

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606706

Amount of Each Receipt this Period
208.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	532.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial)
Mr. David E. Smithkey, CLU, RFC

Mailing Address 9451 Heddy Drive

City State Zip Code
Flushing MI 48433

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606726

Amount of Each Receipt this Period
105.00

Payroll Deduction

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

Mailing Address 9820 Dixon Lane

City State Zip Code
Reno NV 89511-9455

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607301

Amount of Each Receipt this Period
126.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. David L. Stratton, CLU, ChFC,

Mailing Address 13115 Beach Cir.

City State Zip Code
Anchorage AK 99515-3748

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607170

Amount of Each Receipt this Period
105.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	336.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Steven M. Stratton, LUTCF, CSA

Mailing Address 17131 Parkview Dr

City State Zip Code
Morgan Hill CA 95037-6606

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: R1605143

Amount of Each Receipt this Period
105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Eddie L. Sweet, Sr., LUTCF

Mailing Address 5500 W. Park Rd

City State Zip Code
Hollywood FL 33021

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006

Transaction ID: R1608252

Amount of Each Receipt this Period
500.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Matthew S. Tassej, CLU, LUTCF

Mailing Address 5 Reggio Ave.

City State Zip Code
Old Orchard Beach ME 04064-2709

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

Name of Employer Self-employed Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607634

Amount of Each Receipt this Period
72.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	677.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Maria Umbach, FLMI, ACS

Mailing Address 213 Washington St. 11th Fl

City State Zip Code
Newark NJ 07102

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2006

Transaction ID: R1608185

Amount of Each Receipt this Period
600.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Thomas L. Webb, CLU, ChFC

Mailing Address 401 Ratcliff Dr, SE #110

City State Zip Code
Salem OR 97302

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2006

Transaction ID: R1607952

Amount of Each Receipt this Period
360.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Robert J. Wernecke, CLU

Mailing Address 10456 North 134th Way

City State Zip Code
Scottsdale AZ 85259

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 02 / 2006

Transaction ID: R1607663

Amount of Each Receipt this Period
600.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	1560.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Leroy L. Wilbers, Jr.

Mailing Address 309 Deerfield Pl

City State Zip Code
Jefferson City MO 65109

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1605339

Amount of Each Receipt this Period
126.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City State Zip Code
Kennewick WA 99336-1280

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1605108

Amount of Each Receipt this Period
105.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Cliff F. Wilson, CLU, ChFC,

Mailing Address 1458 W. Bahia Court

City State Zip Code
Gilbert AZ 85233

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1604663

Amount of Each Receipt this Period
126.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	357.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Mr. Larry J. Winkelhake, CLU, ChFC

Mailing Address 18600 Longview Ct

City State Zip Code
Brookfield WI 53045

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1606790

Amount of Each Receipt this Period
90.00

Payroll Deduction

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

Mailing Address 104 Clay Ct.

City State Zip Code
Landenberg PA 19350

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: R1607609

Amount of Each Receipt this Period
105.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. David G. Zick, CLU, ChFC

Mailing Address 851 Adams Court

City State Zip Code
Bloomfield Hills MI 48304

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

Name of Employer Self-employed Occupation
Self-employed Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2006

Transaction ID: R1607873

Amount of Each Receipt this Period
625.00

Check

SUBTOTAL of Receipts This Page (optional)	820.00
TOTAL This Period (last page this line number only)	19489.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 29 / 50	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	

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

A. Full Name (Last, First, Middle Initial)
Carper for Senate

Mailing Address 19 East Commons Blvd Second Floor

City	State	Zip Code
New Castle	DE	19720

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	6

Transaction ID: R1608257

Amount of Each Receipt this Period
2500.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	2500.00

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 30 / 50

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. First Union Bank

Mailing Address One First Union Center

City Charlotte State NC Zip Code 28288-1164

Purpose of Disbursement

Bank Charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D8657

Date of Disbursement

03 / 30 / 2006

Amount of Each Disbursement this Period

973.62

Full Name (Last, First, Middle Initial)

B. NAIFA

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042-1205

Purpose of Disbursement
Payroll, Benefits, Supplies, Copies,

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D8656

Date of Disbursement

03 / 30 / 2006

Amount of Each Disbursement this Period

49785.57

etc.

SUBTOTAL of Disbursements This Page (optional)

50759.19

TOTAL This Period (last page this line number only)

50759.19

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. A Lot of People Who Support Jeff Bingaman

Mailing Address PO Box 16210

City Albuquerque State NM Zip Code 87191

Purpose of Disbursement
Contr. Jeff Bingaman (NM-D-US Senate)

Candidate Name
Jeff Bingaman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NM District:

Transaction ID: D8597

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Akaka for Senate in 2006

Mailing Address Post Office Box 3169

City Honolulu State HI Zip Code 96802

Purpose of Disbursement
Contr. Daniel Kahikina Akaka (HI-D-US

Candidate Name
Daniel Kahikina Akaka

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: HI District:

Transaction ID: D8643

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

3000.00

Senate)

Full Name (Last, First, Middle Initial)

C. Anne Northup for Congress

Mailing Address PO Box 7313

City Louisville State KY Zip Code 40257

Purpose of Disbursement
Contr. Anne M. Northup (KY-3-R-US House)

Candidate Name
Anne M. Northup

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: KY District: 03

Transaction ID: D8644

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

1500.00

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)

PAGE 32 / 50

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Back America's Conservatives PAC

Mailing Address 1251 Dartmouth Court

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contr. Back America's Conservati (PAC to
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2006
 Primary General
 Other (specify) ▼
Annual
State: District:

Transaction ID: D8642

Date of Disbursement

03 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

PAC)

B. Baker for Congress Committee

Mailing Address Post Office Box 1694

City Baton Rouge State LA Zip Code 70821

Purpose of Disbursement
Contr. Richard H. Baker (LA-6-R-US
Candidate Name
Richard H. Baker

Category/
Type

Office Sought: House Senate President
Disbursement For: 2006
 Primary General
 Other (specify) ▼
State: LA District: 06

Transaction ID: D8636

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

3000.00

House)

C. Barney Frank for Congress Committee

Mailing Address P O Box 260

City Newtonville State MA Zip Code 02460

Purpose of Disbursement
Contr. Barney Frank (MA-4-D-US House)
Candidate Name
Barney Frank

Category/
Type

Office Sought: House Senate President
Disbursement For: 2006
 Primary General
 Other (specify) ▼
State: MA District: 04

Transaction ID: D8653

Date of Disbursement

03 / 29 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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 33 / 50

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Boyd For Congress

Mailing Address PO Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement
Contr. Allen Boyd (FL-2-D-US House)

Candidate Name
Allen Boyd

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: FL District: 02

Transaction ID: D8630

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Chabot for Congress

Mailing Address 105 West Fourth Street, Room 1133

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement
Contr. Steve Chabot (OH-1-R-US House)

Candidate Name
Steve Chabot

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: OH District: 01

Transaction ID: D8635

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Christopher Shays for Congress Committee

Mailing Address 98 East Avenue Rear Building

City Norwalk State CT Zip Code 06851

Purpose of Disbursement
Contr. Christopher Shays (CT-4-R-US)

Candidate Name
Christopher Shays

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CT District: 04

Transaction ID: D8654

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

2000.00

House)

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 34 / 50

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Artur Davis to Congress

Mailing Address P.O. Box 1845

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
Contr. Artur Davis (AL-7-D-US House)

Candidate Name
Artur Davis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: AL District: 07

Transaction ID: D8632

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

B. Committee to Re-Elect Congressman Duncan Hunter

Mailing Address 9340 Fuerte Drive, Suite 302

City La Mesa State CA Zip Code 91941

Purpose of Disbursement
Contr. Duncan L. Hunter (CA-52-R-US)

Candidate Name
Duncan L. Hunter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 52

Transaction ID: D8611

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1250.00

House)

C. Congressman Bart Gordon Committee

Mailing Address P.O. Box 2008

City Murfreesboro State TN Zip Code 37133

Purpose of Disbursement
Contr. Bart Gordon (TN-6-D-US House)

Candidate Name
Bart Gordon

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: TN District: 06

Transaction ID: D8628

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3250.00

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 35 / 50

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Crowley for Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement
Contr. Joseph Crowley (NY-7-D-US House)

Candidate Name
Joseph Crowley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NY District: 07

Transaction ID: D8601

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DeLauro for Congress

Mailing Address 49 Huntington Street

City New Haven State CT Zip Code 06511

Purpose of Disbursement
Contr. Rosa L. DeLauro (CT-3-D-US House)

Candidate Name
Rosa L. DeLauro

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CT District: 03

Transaction ID: D8604

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contr. DCCC (National Party Committee)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Annual

Transaction ID: D8622

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15000.00

Contribution)

SUBTOTAL of Disbursements This Page (optional)

18000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democratic Senatorial Campaign Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contr. Democratic Senatorial Cam (nat'l)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼
Annual

State: District:

Transaction ID: D8647

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

15000.00

party committee)

B. Dennis Moore for US Congress

Mailing Address PO Box 14631

City Shawnee Mission State KS Zip Code 66285

Purpose of Disbursement
Contr. Dennis Moore (KS-3-D-US House)

Candidate Name

Dennis Moore

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: KS District: 03

Transaction ID: D8598

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

C. Ellen Tauscher for Congress

Mailing Address 20 Park Road, Suite E

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Contr. Ellen O. Tauscher (CA-10-D-US)

Candidate Name

Ellen O. Tauscher

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 10

Transaction ID: D8600

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

House)

SUBTOTAL of Disbursements This Page (optional)

17000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Kent Conrad

Mailing Address PO Box 812

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
Contr. Kent Conrad (ND-D-US Senate)

Candidate Name
Kent Conrad

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: ND District:

Transaction ID: D8615

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Glacier PAC

Mailing Address 818 Connecticut Avenue, NW/Suite 1

City Washington State DC Zip Code 20006

Purpose of Disbursement
Contr. Glacier PAC (PAC to PAC)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D8651

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Growth & Prosperity PAC

Mailing Address 1155 21st Street, NW/Suite 300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contr. Growth & Prosperity PAC (PAC to

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D8652

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

PAC)

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hagel for U.S. Senate

Mailing Address 12100 W. Center Road #202

City Omaha State NE Zip Code 68144

Purpose of Disbursement
Contr. Chuck Hagel (NE-R-US Senate)

Candidate Name
Chuck Hagel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NE District:

Transaction ID: D8602

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Hagel for U.S. Senate

Mailing Address 12100 W. Center Road #202

City Omaha State NE Zip Code 68144

Purpose of Disbursement
Contr. Chuck Hagel (NE-R-US Senate)

Candidate Name
Chuck Hagel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NE District:

Transaction ID: D8634

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Hastert For Congress Committee

Mailing Address P.O. Box 625

City Batavia State IL Zip Code 60510

Purpose of Disbursement
Contr. J. Dennis Hastert (IL-14-R-US)

Candidate Name
J. Dennis Hastert

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IL District: 14

Transaction ID: D8609

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

5000.00

House)

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Holden for Congress

Mailing Address 502 Walnut Street

City Reading State PA Zip Code 19601

Purpose of Disbursement
Contr. Tim Holden (PA-17-D-US House)

Candidate Name
Tim Holden

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: PA District: 17

Transaction ID: D8606

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1500.00

B. Judy Biggert for Congress

Mailing Address P.O. Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement
Contr. Judy Biggert (IL-13-R-US House)

Candidate Name
Judy Biggert

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IL District: 13

Transaction ID: D8608

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

3000.00

C. Keep Our Majority PAC

Mailing Address PO Box 18277

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contr. Keep Our Majority PAC (PAC to

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District: Annual

Transaction ID: D8614

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

5000.00

PAC)

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kline for Congress

Mailing Address 101 Burnsville Parkway, Suite 104

City Burnsville State MN Zip Code 55337

Purpose of Disbursement
Contr. John Kline (MN-2-R-US House)

Candidate Name
John Kline

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MN District: 02

Transaction ID: D8638

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LaTourette for Congress Committee

Mailing Address 7200 Center Street/Suite 102

City Mentor State OH Zip Code 44060

Purpose of Disbursement
Contr. Steven C. LaTourette (OH-14-R-US)

Candidate Name
Steven C. LaTourette

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: OH District: 14

Transaction ID: D8599

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

House)

Full Name (Last, First, Middle Initial)

C. LoBiondo for Congress

Mailing Address PO Box 775

City Marmora State NJ Zip Code 08223

Purpose of Disbursement
Contr. Frank A. LoBiondo (NJ-2-R-US)

Candidate Name
Frank A. LoBiondo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NJ District: 02

Transaction ID: D8621

Date of Disbursement

03 / 09 / 2006

Amount of Each Disbursement this Period

1000.00

House)

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Maloney for Congress

Mailing Address 49 East 92nd Street

City New York State NY Zip Code 10128

Purpose of Disbursement
Contr. Carolyn B. Maloney (NY-14-D-US)

Candidate Name
Carolyn B. Maloney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NY District: 14

Transaction ID: D8620

Date of Disbursement

03 / 09 / 2006

Amount of Each Disbursement this Period

2000.00

House)

B. Melissa Bean for Congress

Mailing Address PO Box 3068

City Barrington State IL Zip Code 60011

Purpose of Disbursement
Contr. Melissa L. Bean (IL-8-D-US House)

Candidate Name
Melissa L. Bean

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IL District: 08

Transaction ID: D8607

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

C. Menendez For Congress

Mailing Address PO Box 848

City Union City State NJ Zip Code 07087

Purpose of Disbursement
Contr. Robert Menendez (NJ-D-US Senate)

Candidate Name
Robert Menendez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NJ District:

Transaction ID: D8603

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Dewine for US Senate

Mailing Address PO Box 340188

City Columbus State OH Zip Code 43234

Purpose of Disbursement
Contr. Mike DeWine (OH-R-US Senate)

Candidate Name
Mike DeWine

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: OH District:

Transaction ID: D8624

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Moore For Congress

Mailing Address P.O. Box 16646

City Milwaukee State WI Zip Code 53216-0646

Purpose of Disbursement
Contr. Gwen Moore (WI-4-D-US House)

Candidate Name
Gwen Moore

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: WI District: 04

Transaction ID: D8625

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Nancy Johnson For Congress

Mailing Address P.O. Box 1986

City New Britain State CT Zip Code 06050

Purpose of Disbursement
Contr. Nancy L. Johnson (CT-5-R-US

Candidate Name
Nancy L. Johnson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CT District: 05

Transaction ID: D8605

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

House)

SUBTOTAL of Disbursements This Page (optional)

7000.00

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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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nancy Pelosi for Congress

Mailing Address 235 Montgomery Street Suite 610

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Contr. Nancy Pelosi (CA-8-D-US House)

Candidate Name
Nancy Pelosi

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 08

Transaction ID: D8623

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Committee

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contr. National Republican Congr (party

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Annual

Transaction ID: D8616

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

15000.00

committee)

Full Name (Last, First, Middle Initial)

C. Pallone for Congress Committee

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
Contr. Frank Pallone, Jr. (NJ-6-D-US

Candidate Name
Frank Pallone, Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NJ District: 06

Transaction ID: D8633

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1500.00

House)

SUBTOTAL of Disbursements This Page (optional)

21500.00

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

Full Name (Last, First, Middle Initial) A. Pearce for Congress		Transaction ID: D8648 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 2696		Amount of Each Disbursement this Period 1000.00
City Hobbs State NM Zip Code 88241	Category/ Type House)	
Purpose of Disbursement Contr. Stevan E. Pearce (NM-2-R-US)		
Candidate Name Stevan E. Pearce		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Peter Hoekstra for Congress		Transaction ID: D8650 Date of Disbursement 03 / 28 / 2006
Mailing Address 1454 Cimarron Drive		Amount of Each Disbursement this Period 1000.00
City Holland State MI Zip Code 49423	Category/ Type	
Purpose of Disbursement Contr. Peter Hoekstra (MI-2-R-US House)		
Candidate Name Peter Hoekstra		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Putnam for Congress Committee		Transaction ID: D8619 Date of Disbursement 03 / 07 / 2006
Mailing Address PO Box 2426		Amount of Each Disbursement this Period 5000.00
City Bartow State FL Zip Code 33831	Category/ Type	
Purpose of Disbursement Contr. Adam H. Putnam (FL-12-R-US House)		
Candidate Name Adam H. Putnam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. RED PAC

Mailing Address 437B New Jersey Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contr. RED PAC (PAC to PAC)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼
Annual

State: District:

Transaction ID: D8637

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

5000.00

B. Richard E. Neal For Congress

Mailing Address 76 Magnolia Terrace #718

City Springfield State MA Zip Code 01108

Purpose of Disbursement
Contr. Richard E. Neal (MA-2-D-US House)

Candidate Name
Richard E. Neal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MA District: 02

Transaction ID: D8645

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

2500.00

C. Roskam for Congress Committee

Mailing Address 1919 Briarcliffe Blvd.

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
Contr. Peter Roskam (IL-6-R-US House)

Candidate Name
Peter Roskam

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IL District: 06

Transaction ID: D8618

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sam Farr for Congress

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Contr. Sam Farr (CA-17-D-US House)

Candidate Name
Sam Farr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 17

Transaction ID: D8613

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Santorum 2006 Committee

Mailing Address One Tower Bridge/Suite 1440

City West Conshohocken State PA Zip Code 19428

Purpose of Disbursement
Contr. Rick Santorum (PA-R-US Senate)

Candidate Name
Rick Santorum

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: PA District:

Transaction ID: D8610

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Schiff for Congress

Mailing Address 725 S. Figueroa St. Ste. 3200

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement
Contr. Adam B. Schiff (CA-29-D-US House)

Candidate Name
Adam B. Schiff

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 29

Transaction ID: D8629

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ►

4500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sherman for Congress

Mailing Address 555 South Flower Street, Suite 451

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Contr. Brad Sherman (CA-27-D-US House)

Candidate Name
Brad Sherman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 27

Transaction ID: D8626

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Snowe for Senate

Mailing Address P.O. Box 2000

City Portland State ME Zip Code 04104

Purpose of Disbursement
Contr. Olympia J. Snowe (ME-R-US Senate)

Candidate Name
Olympia J. Snowe

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: ME District:

Transaction ID: D8631

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Tom Feeney for Congress

Mailing Address 1420 Alafaya Trail #103

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
Contr. Tom Feeney (FL-24-R-US House)

Candidate Name
Tom Feeney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: FL District: 24

Transaction ID: D8617

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Trent Lott for Mississippi

Mailing Address PO Box 22824

City Jackson State MS Zip Code 39225

Purpose of Disbursement
Contr. Trent Lott (MS-R-US Senate)

Candidate Name
Trent Lott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MS District:

Transaction ID: D8612

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

150750.00

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)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Mary F. Debaun

Mailing Address 2925 Maurice Ave

City North Pole State AK Zip Code 99705

Purpose of Disbursement
Refund to Individual

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D8639

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2006

Amount of Each Disbursement this Period

34.00

SUBTOTAL of Disbursements This Page (optional)

34.00

TOTAL This Period (last page this line number only)

34.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 50 / 50	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NAIFA	Nature of Debt (Purpose): Payroll, Benefits, Supplies, Copies, etc
Mailing Address 2901 Telestar Court	
City State ZIP Code Falls Church VA 22042-1205	

Outstanding Balance Beginning This Period	Transaction ID: DD#7711	
74253.70		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	49785.57	24468.13

1) SUBTOTALS This Period This Page (optional).....	24468.13
2) TOTALS This Period (last page this line number only).....	24468.13
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	