

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
FRED THOMPSON POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 10332 MAIN STREET
 Check if different than previously reported. (ACC)
FAIRFAX VA 22030

2. **FEC IDENTIFICATION NUMBER** C00438507
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 11 04 2008 in the State of _____

5. Covering Period 10 16 2008 through 11 24 2008

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

Signature of Treasurer Electronically Filed by RICHARD ROBERTS Date 12 23 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
FRED THOMPSON POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		2140266.92
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	242073.17									
(c) Total Receipts (from Line 19)	62155.63	2675121.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	304228.80	4815388.08								
7. Total Disbursements (from Line 31)	60727.49	4571886.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	243501.31	243501.31								
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)	45395.05									

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
FRED THOMPSON POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15650.00	2083495.83
(i) Itemized (use Schedule A)	17846.00	32892.52
(ii) Unitemized	33496.00	2116388.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5000.00	16050.00
(c) Other Political Committees (such as PACs)	38496.00	2132438.35
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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	303066.30
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	23659.63	239616.51
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))	62155.63	2675121.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	62155.63	2675121.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	49468.06	4260946.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	49468.06	4260946.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	7259.43	50859.43
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	241781.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3800.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	245581.18
29. Other Disbursements.....	4000.00	14500.00
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))..	60727.49	4571886.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60727.49	4571886.77

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)	38496.00	2132438.35
34. Total Contribution Refunds (from Line 28(d))	0.00	245581.18
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38496.00	1886857.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	49468.06	4260946.16
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	303066.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	49468.06	3957879.86

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 6 / 41
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PATRICK COX	Nature of Debt (Purpose): UNCASHED CHECK VOIDED. TO BE RE-ISSUED
Mailing Address 2231 SAN MARCO ISLAND	
City State ZIP Code MARCO ISLAND FL 34145	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD.006	
Amount Incurred This Period 443.34	Payment This Period 0.00	Outstanding Balance at Close of This Period 443.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ANDREW DORR	Nature of Debt (Purpose): UNCASHED CHECK VOIDED. TO BE RE-ISSUED
Mailing Address 13001 UNIVERSITY DRIVE	
City State ZIP Code CLIVE IA 50325	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD.007	
Amount Incurred This Period 345.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 345.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MARLYS GRANT	Nature of Debt (Purpose): UNCASHED CHECKS VOIDED. TO BE RE-ISSUED
Mailing Address 3706 ASHTON DRIVE	
City State ZIP Code AMES IA 50010	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD.008	
Amount Incurred This Period 508.18	Payment This Period 0.00	Outstanding Balance at Close of This Period 508.18

1) SUBTOTALS This Period This Page (optional).....	1296.92
2) TOTALS This Period (last page this line number only).....	
3) TOTAL 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)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NICHOLAS LUNA			Nature of Debt (Purpose): UNCASHED CHECK VOIDED. TO BE RE-ISSUED.
Mailing Address 553 MIDWAY CIRCLE			
City BRENTWOOD	State TN	ZIP Code 37027	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD.009	
Amount Incurred This Period 1390.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 1390.90	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIKOLAS RULE			Nature of Debt (Purpose): UNCASHED CHECK VOIDED. TO BE RE-ISSUED.
Mailing Address 2530 73RD STREET			
City URBANDALE	State IA	ZIP Code 50322	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD.010	
Amount Incurred This Period 34.37	Payment This Period 0.00	Outstanding Balance at Close of This Period 34.37	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AUSTIN WALNE			Nature of Debt (Purpose): UNCASHED CHECK VOIDED. CHECK WILL BE RE
Mailing Address 1760 OLD MEADOW ROAD			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD.011	
Amount Incurred This Period 46.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 46.00	

1) SUBTOTALS This Period This Page (optional).....	1471.27
2) TOTALS This Period (last page this line number only).....	
3) TOTAL 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)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PHILIP WIPPERMAN			Nature of Debt (Purpose): UNCASHED CHECK VOIDED. TO BE RE-ISSUED.
Mailing Address 5353 GREEN VALLEY COURT			
City NASHVILLE	State TN	ZIP Code 37220	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD.012	
Amount Incurred This Period <input type="text" value="417.23"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="417.23"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AJL INTERNATIONAL			Nature of Debt (Purpose): TRANSPORTATION SERVICES
Mailing Address 1227 17TH AVENUE SOUTH			
City NASHVILLE	State TN	ZIP Code 37212	

Outstanding Balance Beginning This Period <input type="text" value="608.11"/>		Transaction ID: SD.001	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="608.11"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GLOBAL CROSSING CONFERENCING			Nature of Debt (Purpose): TELEPHONE SERVICE; BALANCE IS IN DISPUT
Mailing Address P.O. BOX 790407			
City ST. LOUIS	State MO	ZIP Code 63179	

Outstanding Balance Beginning This Period <input type="text" value="23687.58"/>		Transaction ID: SD.004	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="23687.58"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="24712.92"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 / 41
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor XO COMMUNICATIONS			Nature of Debt (Purpose): TELEPHONE SERVICE; AMOUNT IS IN DISPUTE
Mailing Address 14239 COLLECTIONS CENTER DRIVE			
City CHICAGO	State IL	ZIP Code 60693	

Outstanding Balance Beginning This Period		Transaction ID: SD.005	
17913.94			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	17913.94	

1) SUBTOTALS This Period This Page (optional).....	17913.94
2) TOTALS This Period (last page this line number only).....	45395.05
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	45395.05

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 41
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERTA ATLAS

Mailing Address P.O. BOX 1514

City State Zip Code
SIERRA VISTA AZ 85636

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

Name of Employer Occupation
RETIREED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

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

Transaction ID: SA11.C010

Amount of Each Receipt this Period
25.00

EARMARKED CONTRIBUTION

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARD-
ED TO DAVID SCHWEIKERT FOR
CONGRESS

B. Full Name (Last, First, Middle Initial)
CHRIS BAIR

Mailing Address 23808 S. HARMONY WAY

City State Zip Code
SUN LAKES AZ 85248

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

Name of Employer Occupation
RETIREED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

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

Transaction ID: SA11.C001

Amount of Each Receipt this Period
25.00

EARMARKED CONTRIBUTION

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARD-
ED TO DAVID SCHWEIKERT FOR
CONGRESS

C. Full Name (Last, First, Middle Initial)
NAZOMA BALL

Mailing Address 818 S. MAIN STREET

City State Zip Code
COTTONWOOD AZ 86326

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

Name of Employer Occupation
RETIREED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

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

Transaction ID: SA11.C006

Amount of Each Receipt this Period
50.00

EARMARKED CONTRIBUTION

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARD-
ED TO DAVID SCHWEIKERT FOR
CONGRESS

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 41
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM BOWERS

Mailing Address 3301 CHESTNUT CIRCLE

City State Zip Code
CLEVELAND TN 37312-2116

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250720

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GLENN CLARK

Mailing Address 6146 MARLETTE AVENUE

City State Zip Code
GLENDALE AZ 85301

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

Name of Employer Occupation
2008 RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

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

Transaction ID: SA11.C003

Amount of Each Receipt this Period
30.00

EARMARKED CONTRIBUTION

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARDED TO DAVID SCHWEIKERT FOR CONGRESS

C.

Full Name (Last, First, Middle Initial)
JOSEPH CRAIG

Mailing Address 1385 HWY 35 #300

City State Zip Code
MIDDLETOWN NJ 07748-2012

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

Name of Employer Occupation
CS TECHNOLOGY ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11.250443

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 41
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JERRY CRATER

Mailing Address 1970 S. TUMBLEWEED LANE

City CHANDLER State AZ Zip Code 85286

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

Name of Employer Occupation
RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt

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

Transaction ID: SA11.C004

Amount of Each Receipt this Period
100.00

EARMARKED CONTRIBUTION

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARDED TO DAVID SCHWEIKERT FOR CONGRESS

B.

Full Name (Last, First, Middle Initial)
MR. JOHN M. DOWD

Mailing Address 1529 CROWELL ROAD

City VIENNA State VA Zip Code 22182-1514

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

Name of Employer Occupation
PARTNER, AKIN, GUMP STRAUSS HAUER & FE
LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11.250563

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
E J GAIENNIE

Mailing Address 503 SHERWOOD

City SHREVEPORT State LA Zip Code 71106

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11.250439

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MICHAEL HALEY

Mailing Address P.O. BOX 1022

City State Zip Code
CAREFREE AZ 85377

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

Name of Employer Occupation
EMCARE PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250374

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARK HARLAN

Mailing Address 14118 ASHLAND LANDING DRIVE

City State Zip Code
CYPRESS TX 77429

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

Name of Employer Occupation
SELF REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250705

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JENICE HEWES

Mailing Address 720 COUNTY ROAD 3100

City State Zip Code
CLARKSVILLE TX 75426

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250375

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT JUNG

Mailing Address 1545 BARRINGTON WOODS DRIVE

City State Zip Code
BROOKFIELD WI 53045

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

Name of Employer Occupation
TRICO CORPORATION CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250642

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BEN KIRKLAND

Mailing Address 4900 ELF TRAIL

City State Zip Code
BELTON TX 76513

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250440

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY KNIGHT

Mailing Address 1059 BLACK RUSH CIRCLE

City State Zip Code
MOUNT PLEASANT SC 29466-8082

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

Name of Employer Occupation
SELF-EMPLOYED SELF-EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

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

Transaction ID: SA11.250510

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TOM LIGUORI

Mailing Address 16885 VIA DEL CAMPO CT

City State Zip Code
SAN DIEGO CA 92127

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

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: SA11.250361

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
EUGENE LIPTHEY

Mailing Address 82 E. SANTA CHALICE DRIVE

City State Zip Code
GREEN VALLEY AZ 85614

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

Name of Employer

Occupation
RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

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

Transaction ID: SA11.C002

Amount of Each Receipt this Period

25.00

EARMARKED CONTRIBUTION

[MEMO ITEM]

CONTRIBUTOR CHECK FORWARD-
ED TO DAVID SCHWEIKERT FOR
CONGRESS

C.

Full Name (Last, First, Middle Initial)
PATRICIA LLOYD

Mailing Address 11001 N. 99TH AVENUE, #116-34

City State Zip Code
PEORIA AZ 85345

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

Name of Employer

Occupation
RETIRED

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: SA11.C007

Amount of Each Receipt this Period

250.00

EARMARKED CONTRIBUTION

[MEMO ITEM]

CONTRIBUTOR CHECK FORWARD-
ED TO DAVID SCHWEIKERT FOR
CONGRESS

SUBTOTAL of Receipts This Page (optional) ►

1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 41
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) HALL PALMER	Date of Receipt MM / DD / YYYY 11 / 20 / 2008
	Mailing Address 501 SNELL ISLE BLVD NE	Transaction ID: SA11.250565
	City State Zip Code ST.PETERSBURG FL 33704-3601	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) KEVIN PANTENBERG	Date of Receipt MM / DD / YYYY 10 / 20 / 2008
	Mailing Address INFO. REQUESTED	Transaction ID: SA11.C005
	City State Zip Code INFO. REQUESTED AZ	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	EARMARKED CONTRIBUTION
	Name of Employer Occupation 2008	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] CONTRIBUTOR CHECK FORWARDED TO DAVID SCHWEIKERT FOR CONGRESS

C.	Full Name (Last, First, Middle Initial) CHRIS PETRIN	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 448 GREENWOOD BEACH ROAD	Transaction ID: SA11.250461
	City State Zip Code TIBURON CA 94920-2215	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 41
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT PULLAR	Date of Receipt MM / DD / YYYY 11 / 03 / 2008
	Mailing Address 413 E. BALBOA DRIVE	Transaction ID: SA11.C008
	City State Zip Code TEMPE AZ 85282	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	EARMARKED CONTRIBUTION
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARDED TO DAVID SCHWEIKERT FOR CONGRESS

B.	Full Name (Last, First, Middle Initial) WILLIAM RITCHIE	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 5302 BROOKEWAY DR	Transaction ID: SA11.250449
	City State Zip Code BETHESDA MD 20816-1308	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation N/A RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) LISA SANZONE	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address 137 BOULEVARD	Transaction ID: SA11.250471
	City State Zip Code MOUNTAIN LAKES NJ 07046	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation COLDWELL BANKER SALES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 41
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JERRY SHORT		Date of Receipt
	Mailing Address 2912 CREEKSIDE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 20 / 2008
	City	State	Zip Code
	WESTLAKE	OH	44145
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.250621
Name of Employer CLIPPER LOGIC		Occupation SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) H. L. STAPLES		Date of Receipt
	Mailing Address RR 2 BOX 480		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 25 / 2008
	City	State	Zip Code
	MCCLOUD	OK	74851
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.250391
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MARK STEPHENS		Date of Receipt
	Mailing Address 28002 SAPPHIRE COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 20 / 2008
	City	State	Zip Code
	MAGNOLIA	TX	77355-1845
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.250691
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
WILLIAM STEWART

Mailing Address **BOX 159**

City **STEVENSON** State **MD** Zip Code **21153**

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

Name of Employer **ASSET STRATEGY CONSULTANTS** Occupation **INVESTMENT CONSULTING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **11 / 21 / 2008**

Transaction ID: SA11.250727

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JAMES SWAIN

Mailing Address **11903 MUSKET LANE**

City **HOUSTON** State **TX** Zip Code **77024-5051**

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

Name of Employer **SELF-EMPLOYED** Occupation **OIL & GAS CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **11 / 20 / 2008**

Transaction ID: SA11.250618

Amount of Each Receipt this Period **1000.00**

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MARYF UFFORD

Mailing Address **P.O. BOX 605**

City **ALBERTVILLE** State **AL** Zip Code **35950**

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

Name of Employer **SOUTH DEKALB FAMILY MEDICAL ASSOCIATES** Occupation **OFFICE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 21 / 2008**

Transaction ID: SA11.250710

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
KELLY WIENTGE

Mailing Address P.O. BOX 382

City State Zip Code
LEBANON OH 45036-0382

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

Name of Employer Occupation
KING'S ELECTRIC SERVICES OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11.250442

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDGAR H. WILLIAMS

Mailing Address 2900 COVE CAY DRIVE APT 3G

City State Zip Code
CLEARWATER FL 33760-1209

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

Name of Employer Occupation
LEGACY CAPITAL GROUP INC. COMMODITY POOL OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11.250362

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT WITHROW

Mailing Address 11120 W. ORANGE GROVE ROAD

City State Zip Code
TUCSON AZ 85743

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

Name of Employer Occupation

Receipt For: 2008 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

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

Transaction ID: SA11.C009

Amount of Each Receipt this Period
20.00

EARMARKED CONTRIBUTION

[MEMO ITEM]
CONTRIBUTOR CHECK FORWARD-
ED TO DAVID SCHWEIKERT FOR
CONGRESS

SUBTOTAL of Receipts This Page (optional) ► 5250.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARSHALL WOLFE

Mailing Address 6277 COUNTY ROAD 16A

City State Zip Code
SAINT AUGUSTINE FL 32092-1801

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

Name of Employer SELF-EMPLOYED Occupation RANCHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	8

Transaction ID: SA11.250400

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARSHALL WOLFE

Mailing Address 6277 COUNTY ROAD 16A

City State Zip Code
SAINT AUGUSTINE FL 32092-1801

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

Name of Employer SELF-EMPLOYED Occupation RANCHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11.250478

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	15650.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 41
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
CERNER CORPORATION PAC

Mailing Address 2800 ROCKCREEK PARKWAY

City State Zip Code
KANSAS CITY MO 64117

FEC ID number of contributing federal political committee. **C** C00410589

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11.250428

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 23 / 41	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DIAMOND LIST MARKETING COMPANY		Date of Receipt
	Mailing Address 6715 LITTLE RIVER TURNPIKE		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	ANNANDALE	VA	22003
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA.001
Receipt For:		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="0.00"/>	<input type="text" value="23659.63"/>
<input type="checkbox"/> Other (specify) ▼			LIST RENTAL INCOME
			USUAL AND CUSTOMARY MARKET COSTS

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="23659.63"/>
TOTAL This Period (last page this line number only)	<input type="text" value="23659.63"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BOBBIE MURPHY	Transaction ID: SB.001 Date of Disbursement
	Mailing Address 4815 WAYSIDE DRIVE	<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City OLD HICKORY State TN Zip Code 37138	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1242.65"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOBBIE MURPHY	Transaction ID: SB.002 Date of Disbursement
	Mailing Address 4815 WAYSIDE DRIVE	<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City OLD HICKORY State TN Zip Code 37138	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL	<input type="text" value="1242.65"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB.003 Date of Disbursement
	Mailing Address P.O. BOX 53852	<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City PHOENIX State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	<input type="text" value="1.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2486.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) AON RISK SERVICES Mailing Address 1120 20TH STREET, NW City WASHINGTON State DC Zip Code 20036 Purpose of Disbursement LIABILITY INSURANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.004 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 4375.00

B. Full Name (Last, First, Middle Initial) ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS Mailing Address 10424 WOODBURY WOODS COURT City FAIRFAX State VA Zip Code 22032 Purpose of Disbursement REIMBURSE EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.005 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1343.71 DELIVERY CHARGES \$83.78; TRANSPORTATION \$580.00. POSTAGE FOR FUND RAISING MAILING \$679.93

C. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 LEESBURG PIKE City FALLS CHURCH State VA Zip Code 22043 Purpose of Disbursement LIST MAINTENANCE/COMPLIANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.007 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 19374.86

SUBTOTAL of Disbursements This Page (optional) ▶	25093.57
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMCAST Mailing Address P.O. BOX 105257 City ATLANTA State GA Zip Code 30348 Purpose of Disbursement UTILITIES/EQUIPMENT RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.008 Date of Disbursement 11 / 10 / 2008 Amount of Each Disbursement this Period 1015.32 Category/Type
B.	Full Name (Last, First, Middle Initial) CW ACCOUNTING SERVICES Mailing Address 10424 WOODBURY WOODS COURT City FAIRFAX State VA Zip Code 22032 Purpose of Disbursement PROFESSIONAL SERVICES ADMINISTRATION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.009 Date of Disbursement 11 / 10 / 2008 Amount of Each Disbursement this Period 1152.00 PROFESSIONAL SERVICES \$11-50.00/POSTAGE \$2.00
C.	Full Name (Last, First, Middle Initial) NOVA INFORMATION SERVICES INC Mailing Address 7300 CHAMPION HIGHWAY City KNOXVILLE State TN Zip Code 37920 Purpose of Disbursement CREDIT CARD PROCESSING FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.010 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 658.10 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2825.42

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 22 CENTURY BLVD SUITE 150 <hr/> City NASHVILLE State TN Zip Code 37229 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.011 Date of Disbursement 10 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 407.10
B.	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 22 CENTURY BLVD SUITE 150 <hr/> City NASHVILLE State TN Zip Code 37229 <hr/> Purpose of Disbursement PAYROLL PROCESSING FEES Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.012 Date of Disbursement 11 / 10 / 2008 <hr/> Amount of Each Disbursement this Period 219.86
C.	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 22 CENTURY BLVD SUITE 150 <hr/> City NASHVILLE State TN Zip Code 37229 <hr/> Purpose of Disbursement PAYROLL PROCESSING FEES Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.013 Date of Disbursement 11 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 15.00

SUBTOTAL of Disbursements This Page (optional) ▶

641.96

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 28 / 41

<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.014 Date of Disbursement 11 / 14 / 2008
	Mailing Address 22 CENTURY BLVD SUITE 150	Amount of Each Disbursement this Period 372.10
	City NASHVILLE State TN Zip Code 37229	
	Purpose of Disbursement PAYROLL TAXES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RJD GROUP	Transaction ID: SB.015 Date of Disbursement 11 / 10 / 2008
	Mailing Address P.O. BOX 210753	Amount of Each Disbursement this Period 5000.00
	City NASHVILLE State TN Zip Code 37221	
	Purpose of Disbursement POLITICAL CONSULTING SERVICES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SENDLABS	Transaction ID: SB.016 Date of Disbursement 11 / 10 / 2008
	Mailing Address 121 RIVER FRONT DRIVE, #2	Amount of Each Disbursement this Period 750.00
	City MANCHESTER State NH Zip Code 03102	
	Purpose of Disbursement DONOR CONTACT SERVICES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6122.10
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRIVE COMMUNICATIONS	Transaction ID: SB.017
	Mailing Address 2602 WINDWOOD DRIVE	Date of Disbursement MM / DD / YYYY 11 / 10 / 2008
	City WINCHESTER State VA Zip Code 22601	Amount of Each Disbursement this Period 1079.50
	Purpose of Disbursement MAILING COSTS FOR FUND-RAISING MAILING	INCLUDED PRINTING AND MAILING COSTS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) TRIO STRATEGIES	Transaction ID: SB.019
	Mailing Address 9146 WOOD POINTE WAY	Date of Disbursement MM / DD / YYYY 11 / 10 / 2008
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 1341.66
	Purpose of Disbursement THANK YOU MAILING/DESIGN WORK	DESIGN WORK \$1250/PRINTING \$40/POSTAGE \$51.66
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: SB.020
	Mailing Address 86 MAPLE AVENUE	Date of Disbursement MM / DD / YYYY 11 / 10 / 2008
	City NEW CITY State NY Zip Code 10956	Amount of Each Disbursement this Period 112.25
	Purpose of Disbursement MAIL MONITORING	
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2533.41
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) WADE STRATEGIC COMMUNICATIONS	Transaction ID: SB.021
	Mailing Address 6846 MCLEAN PROVINCE CIRCLE	Date of Disbursement MM / DD / YYYY 11 / 10 / 2008
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period 2197.07
	Purpose of Disbursement WEB SITE MAINTENANCE AND SUPPORT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WEBSTER, CHAMBERLAIN AND BEAN	Transaction ID: SB.022
	Mailing Address 1747 PENNSYLVANIA AVENUE, NW	Date of Disbursement MM / DD / YYYY 11 / 10 / 2008
	City WASHINGTON State DC Zip Code 20006	Amount of Each Disbursement this Period 5067.61
	Purpose of Disbursement LEGAL SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) YUMA SOLUTIONS, INC.	Transaction ID: SB.023
	Mailing Address P.O. BOX 152075	Date of Disbursement MM / DD / YYYY 11 / 10 / 2008
	City TALLAHASSEE State FL Zip Code 33684	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement COMPUTER SERVICES/MAINTENANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

9764.68

TOTAL This Period (last page this line number only)

49468.06

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

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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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ALLEN WEST FOR CONGRESS</p> <p>Mailing Address P.O. BOX 30786</p> <p>City PALM BEACH GARDENS State FL Zip Code 33420</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name ALLEN WEST</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 22</p>	<p>Transaction ID: SB.024</p> <p>Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>B. Full Name (Last, First, Middle Initial) CHRIS LEE FOR CONGRESS</p> <p>Mailing Address P.O. BOX 15395</p> <p>City ROCHESTER State NY Zip Code 14615</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name CHRIS LEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 26</p>	<p>Transaction ID: SB.025</p> <p>Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C. Full Name (Last, First, Middle Initial) JAY LOVE FOR CONGRESS</p> <p>Mailing Address 1020 MONTICELLO COURT #205</p> <p>City MONTGOMERY State AL Zip Code 36117</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</p> <p>Candidate Name JAY LOVE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AL District: 02</p>	<p>Transaction ID: SB.026</p> <p>Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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Detailed Summary Page

FOR LINE NUMBER:
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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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) TOM ROONEY FOR CONGRESS	Transaction ID: SB.027 Date of Disbursement																			
	Mailing Address 2336 S. EAST OCEAN BLVD. #313	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	1	/	2	0	0	8												
	City STUART State FL Zip Code 34996	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00																		
1500.00																					
	Candidate Name TOM ROONEY	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: FL District: 16																				

B.	Full Name (Last, First, Middle Initial) ROBERTA ATLAS	Transaction ID: SB23.C010 Date of Disbursement																			
	Mailing Address P.O. BOX 1514	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	0	/	2	0	0	8												
	City SIERRA VISTA State AZ Zip Code 85636	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED	<table border="1"><tr><td>25.00</td></tr></table>	25.00																		
25.00																					
	Candidate Name DAVID SCHWEIKERT	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: AZ District: 05	[MEMO ITEM]																			

C.	Full Name (Last, First, Middle Initial) CHRIS BAIR	Transaction ID: SB23.C001 Date of Disbursement																			
	Mailing Address 23808 S. HARMONY WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	0	/	2	0	0	8												
	City SUN LAKES State AZ Zip Code 85248	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED	<table border="1"><tr><td>25.00</td></tr></table>	25.00																		
25.00																					
	Candidate Name DAVID SCHWEIKERT	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: AZ District: 05	[MEMO ITEM]																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00
1500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NAZOMA BALL</p> <p>Mailing Address 818 S. MAIN STREET</p> <p>City COTTONWOOD State AZ Zip Code 86326</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C006 Date of Disbursement: 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) GLENN A CLARK</p> <p>Mailing Address 6146 MARLETTE AVENUE</p> <p>City GLENDALE State AZ Zip Code 85301</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C003 Date of Disbursement: 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) JERRY CRATER</p> <p>Mailing Address 1970 S. TUMBLEWEED LANE</p> <p>City CHANDLER State AZ Zip Code 85286</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C004 Date of Disbursement: 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) EUGENE LIPTHEY</p> <p>Mailing Address 82 E. SANTA CHALICE DRIVE</p> <p>City GREEN VALLEY State AZ Zip Code 85614</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C002</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) PATRICIA LLOYD</p> <p>Mailing Address 11001 N. 99TH AVENUE, #116-34</p> <p>City PEORIA State AZ Zip Code 85345</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C007</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) KEVIN PANTENBERG</p> <p>Mailing Address</p> <p>City State AZ Zip Code</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C005</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ROBERT PULLAR</p> <p>Mailing Address 413 E. BALBOA DRIVE</p> <p>City TEMPE State AZ Zip Code 85282</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C008 Date of Disbursement: 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) ROBERT WITHROW</p> <p>Mailing Address 11120 W. ORANGE GROVE ROAD</p> <p>City TUCSON State AZ Zip Code 85743</p> <p>Purpose of Disbursement CONTRIBUTOR CHECK FORWARDED</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.C009 Date of Disbursement: 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS</p> <p>Mailing Address 10424 WOODBURY WOODS COURT</p> <p>City FAIRFAX State VA Zip Code 22032</p> <p>Purpose of Disbursement POSTAGE FOR FUND RAISING MAILING</p> <p>Candidate Name DAVID SCHWEIKERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.006 Date of Disbursement: 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 679.93</p> <p>CONTRIBUTION IN KIND</p>

SUBTOTAL of Disbursements This Page (optional) ▶

679.93

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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STRIVE COMMUNICATIONS

Transaction ID: SB.018

Date of Disbursement

Mailing Address 2602 WINDWOOD DRIVE

^M 1	^M 1	/	^D 1	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 8
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City WINCHESTER State VA Zip Code 22601

Amount of Each Disbursement this Period

1079.50

Purpose of Disbursement
MAILING COSTS FOR FUNDRAISING MAILING

Category/
Type

Candidate Name
DAVID SCHWEIKERT

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AZ District: 05

INCLUDES PRINTING AND MAILING COSTS; CONTRIBUTION IN KIND

SUBTOTAL of Disbursements This Page (optional)

1079.50

TOTAL This Period (last page this line number only)

7259.43

**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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JIM ASHURST</p> <p>Mailing Address INFO. REQUESTED</p> <p>City INFO. REQUESTED State TX Zip Code 99999</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.028 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -100.00</p> <p>ORIGINAL ISSUED 6/13/08</p>
<p>B. Full Name (Last, First, Middle Initial) ROBERT DAVIS</p> <p>Mailing Address 11611 LAMPSON AVENUE</p> <p>City GARDEN GROVE State CA Zip Code 92840</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.029 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -100.00</p> <p>ORIGINAL ISSUED 6/13/08</p>
<p>C. Full Name (Last, First, Middle Initial) DANIEL FOX</p> <p>Mailing Address 3340A GREENS ROAD SUITE 200</p> <p>City HOUSTON State TX Zip Code 77032</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.030 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -50.00</p> <p>ORIGINAL ISSUED 6/13/08</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-250.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ALFRED GOLLAND</p> <p>Mailing Address 330 CHERRY DRIVE</p> <p>City PASADENA State CA Zip Code 91105</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.031 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -5.00</p> <p>ORIGINAL DATED 6/13/08</p>
<p>B. Full Name (Last, First, Middle Initial) JAMES LAMBERT</p> <p>Mailing Address P.O. BOX 131631</p> <p>City SAN MARCOS State CA Zip Code 92078</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.032 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -10.00</p> <p>ORIGINAL ISSUED 6/13/08</p>
<p>C. Full Name (Last, First, Middle Initial) TONY PADILLA</p> <p>Mailing Address P.O. BOX 326 1292 E. PALM DRIVE</p> <p>City EXETER State CA Zip Code 93286</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.033 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -50.00</p> <p>ORIGINAL ISSUED 6/13/08</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-65.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) IRENE ROGERS</p> <p>Mailing Address 3600 SEVIER HEIGHTS ROAD</p> <p>City KNOXVILLE State TN Zip Code 37920</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.034 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -35.00</p> <p>ORIGINAL ISSUED 6/13/08</p>
<p>B. Full Name (Last, First, Middle Initial) WILLIAM WEISS</p> <p>Mailing Address INFO. REQUESTED</p> <p>City INFO REQUESTED State VA Zip Code 99999</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.035 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -100.00</p> <p>ORIGINAL ISSUED 6/13/08</p>
<p>C. Full Name (Last, First, Middle Initial) JOHN WOERNER</p> <p>Mailing Address INFO. REQUESTED</p> <p>City INFO. REQUESTED State VA Zip Code 99999</p> <p>Purpose of Disbursement VOID UNDELIVERABLE REFUND CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.036 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period -20.00</p> <p>ORIGINAL ISSUED 6/13/08</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-155.00

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

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

Use separate schedule(s)
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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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
U.S. DEPARTMENT OF THE TREASURY

Mailing Address FINANCIAL MANAGEMENT SERVICES
3700 EAST WEST HIGHWAY

City State Zip Code
HYATTSVILLE MD 20872

Purpose of Disbursement
DISGORGEMENT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB.037

Date of Disbursement

^M 1	^M /	^D 0	^D 3	/	^Y 2	^Y 0	^Y 0	^Y 8
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Amount of Each Disbursement this Period

470.00

SUBTOTAL of Disbursements This Page (optional)

470.00

TOTAL This Period (last page this line number only)

0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELECT PAT MCCRORY GOVERNOR

Mailing Address P.O. BOX 12494

City CHARLOTTE State NC Zip Code 28220

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
PAT MCCRORY

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

GOVERNOR

Transaction ID: SB.038

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

2000.00

GOVERNOR'S RACE - NC - GENERAL

B. Full Name (Last, First, Middle Initial)
MITCH FOR GOVERNOR CAMPAIGN COMMITTEE

Mailing Address 47 S. MERIDIAN STREET
2ND FLOOR

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
MITCH DANIELS

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

GOVERNOR

Transaction ID: SB.039

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

2000.00

GOVERNOR RACE - INDIANA - GENERAL

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00