

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 Comm

ADDRESS (number and street) 2901 Telearstar Ct.
 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 12 01 2009 through 12 31 2009

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 Randy L. Scritchfield

Signature of Treasurer Electronically Filed by Randy L. Scritchfield Date 03 02 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		256835.75
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	559185.96									
(c) Total Receipts (from Line 19)	159649.01	1089754.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	718834.97	1346590.32								
7. Total Disbursements (from Line 31)	19097.56	646852.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	699737.41	699737.41								
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)	48683.74									

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 Comm

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	50921.38	341598.74
(ii) Unitemized	108727.63	745655.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)	159649.01	1087254.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	159649.01	1089754.57
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	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	159649.01	1089754.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	159649.01	1089754.57

DETAILED SUMMARY PAGE

of Disbursements

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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.....	2480.56	74738.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2480.56	74738.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	571450.00
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	117.00	664.00
(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))	117.00	664.00
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))..	19097.56	646852.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19097.56	646852.91

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	159649.01	1089754.57
34. Total Contribution Refunds (from Line 28(d))	117.00	664.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	159532.01	1089090.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2480.56	74738.91
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2480.56	74738.91

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr. Howard J. Elias		Date of Receipt MM / DD / YYYY 12 / 01 / 2009
Mailing Address 355 Lexington Ave., 9th Floor		Transaction ID: 8855565
City New York	State NY	Zip Code 10044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wealth Advisory Group LLC	Occupation CEO	
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) Mr. Marvin Bruce Langford		Date of Receipt MM / DD / YYYY 12 / 01 / 2009
Mailing Address 3810 Battersea Rd.		Transaction ID: 8855585
City Coconut Grove	State FL	Zip Code 33133-6704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer State Farm Insurance Companies	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Mr. David M. Brown		Date of Receipt MM / DD / YYYY 12 / 01 / 2009
Mailing Address 4254 Lakehaven Drive		Transaction ID: 8855589
City Atlanta	State GA	Zip Code 30319-1136
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Northwestern Mutual - Goodwin, Wright	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	900.00
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 7 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas O. Michel

Mailing Address 16880 Avenida De Santa Ynez

City State Zip Code
Pacific Palisades CA 90272-2127

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

Name of Employer Occupation
PRB Financial Group Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: 8855595

Amount of Each Receipt this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Mr. Paul L. Farr

Mailing Address PO Box 112

City State Zip Code
Point Harbor NC 27964-0112

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

Name of Employer Occupation
Southern Farm Bureau Life Insurance AGENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

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

Transaction ID: 8855615

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Mr. Cale Paul Smith

Mailing Address 376 Riverlon Ave

City State Zip Code
Baton Rouge LA 70806

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

Name of Employer Occupation
Smith Financial Group Financial Representative

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 2 / 0 1 / 2 0 0 9

Transaction ID: 8855689

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

975.00

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 8 / 234
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Mr. Ben C. Kaufmann

Mailing Address 125 Sycamore Rd

City State Zip Code
Lexington KY 40502-1841

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

Name of Employer You're Outta Here Occupation
General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2009

Transaction ID: 8855807

Amount of Each Receipt this Period
420.00

B.

Full Name (Last, First, Middle Initial)
Mr. Harold L. Wilshinsky

Mailing Address 179 E. 70th Street #15B

City State Zip Code
New York NY 10021-5109

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

Name of Employer Kap Planning, Ltd. Occupation
CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 03 / 2009

Transaction ID: 8855809

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. David A. Reynolds

Mailing Address 14803 Ashford Springs Ln

City State Zip Code
Humble TX 77396-6043

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

Name of Employer Lincoln Financial Network Occupation
Sales Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2009

Transaction ID: 8855829

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1170.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Scott G. Christensen

Mailing Address 12 High Meadow Ln.

City State Zip Code
Amherst NH 03031-2554

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Northwestern Mutual Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
12 / 09 / 2009

Transaction ID: 8855893

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Randy L. Scritchfield

Mailing Address 10105 Nightingale St.

City State Zip Code
Gaithersburg MD 20882-4019

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Montgomery Financial Group, Inc. 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
12 / 10 / 2009

Transaction ID: 8855915

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gary M. Lane

Mailing Address 925 Highland Terrace NE

City State Zip Code
Atlanta GA 30306

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8855931

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 575.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Lawrence E. Lounds		Date of Receipt																					
	Mailing Address 2477 Valley Oaks Circle		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	0	/	2	0	0	9														
	City State Zip Code Flint MI 48532		Transaction ID: 8855937																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Security 1st Benefits Corp. Occupation: CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1260.00		105.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Mark L. Yavornitzki		Date of Receipt																					
	Mailing Address 14 Bridle Pl		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	0	/	2	0	0	9														
	City State Zip Code E Greenbush NY 12061		Transaction ID: 8855939																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: GR Initiatives, LLC Occupation: Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		25.00																						

C.	Full Name (Last, First, Middle Initial) Mr. John C. Parker		Date of Receipt																					
	Mailing Address 47 Laurel Hill Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	0	/	2	0	0	9														
	City State Zip Code Niantic CT 06357-1536		Transaction ID: 8855945																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Parker Agency - Health Related Insuran Occupation: PRINCIPAL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		25.00																						

SUBTOTAL of Receipts This Page (optional)	▶	155.00
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 / 234
	(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 Comm

A.

Full Name (Last, First, Middle Initial) Mr. Richard R. Courtemanche		Date of Receipt MM / DD / YYYY 12 / 09 / 2009
Mailing Address 27 Rejane Ave		Transaction ID: 8855969
City Lewiston	State ME	Zip Code 04240-2513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Modern Woodmen of America	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Mr. Russell W. Arman		Date of Receipt MM / DD / YYYY 12 / 09 / 2009
Mailing Address 2111 Sherman Dr		Transaction ID: 8855975
City Bismarck	State ND	Zip Code 58504-3103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Arman Agency Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Mr. Joseph P. Leary		Date of Receipt MM / DD / YYYY 12 / 09 / 2009
Mailing Address 14004 W 113th St.		Transaction ID: 8855977
City Lenexa	State KS	Zip Code 66215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Allstate Financial Services	Occupation AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	660.00
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 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Edward A. Zabielski, Jr.
 Mailing Address 104 Clay Ct.
 City Landenberg State PA Zip Code 19350
 Date of Receipt 12 / 10 / 2009
Transaction ID: 8855989
 Amount of Each Receipt this Period 105.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Edward A. Zabielski Jr & Co. Occupation President/Owner
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1310.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Wells
 Mailing Address 18830 Los Hermanos Ranch Rd
 City Valley Center State CA Zip Code 92082-6808
 Date of Receipt 12 / 09 / 2009
Transaction ID: 8855993
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Daniel Wells Insurance & Financial Ser Occupation Owner/Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 752.50

C. Full Name (Last, First, Middle Initial)
Mr. Kevin J. Leahy
 Mailing Address 2141 Llewellyn Pkwy
 City Forked River State NJ Zip Code 08731-3818
 Date of Receipt 12 / 10 / 2009
Transaction ID: 8855999
 Amount of Each Receipt this Period 25.20
 FEC ID number of contributing federal political committee. C
 Name of Employer Allstate Life Ins. Co. Occupation Financial Services Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 302.40

SUBTOTAL of Receipts This Page (optional) ► 180.20
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 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Laurene B. Prevette

Mailing Address 741 Romany Road

City State Zip Code
Charlotte NC 28203-4849

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

Name of Employer: Equity Brokerage, Inc. Occupation: President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 12 / 10 / 2009

Transaction ID: 8856001

Amount of Each Receipt this Period: 27.50

B.

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

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: Burwell & Burwell Occupation: Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 864.00

Date of Receipt: 12 / 10 / 2009

Transaction ID: 8856009

Amount of Each Receipt this Period: 72.00

C.

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

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: Allstate Life Insurance Company Occupation: Agency Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1260.00

Date of Receipt: 12 / 10 / 2009

Transaction ID: 8856011

Amount of Each Receipt this Period: 105.00

SUBTOTAL of Receipts This Page (optional) ► **204.50**

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 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Guy S. Bowering		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 9		
	Mailing Address 129 Woodland Hills Blvd.		Transaction ID: 8856019		
	City Madison	State MS	Zip Code 39110	Amount of Each Receipt this Period 22.50	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer United Producers Group		Occupation Regional Sales Manager		Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Mr. Angelo T. Stath		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 9		
	Mailing Address 7821 Massachusetts		Transaction ID: 8856023		
	City Merrville	State IN	Zip Code 46410-5531	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Angelo T. Stath Ins. & Fi-nc		Occupation President		Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Mr. Neil M. Cubberley		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 9		
	Mailing Address P.O. BOX 5109		Transaction ID: 8856027		
	City SEVIERVILLE	State TN	Zip Code 37864-5109	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Cubberley Agency, Inc.		Occupation OWNER		Aggregate Year-to-Date ▼ 337.50	

SUBTOTAL of Receipts This Page (optional) ▶

102.50

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 / 234
	(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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Kent A. Bennett	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 280 Hollow Road	Transaction ID: 8856029
	City State Zip Code Muncy PA 17756-5789	Amount of Each Receipt this Period 87.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Kent A. Bennett & Assoc., Inc. Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00	

B.	Full Name (Last, First, Middle Initial) Mr. C. Phillip Smelley	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 380 Broadmoor Drive	Transaction ID: 8856033
	City State Zip Code Fayetteville GA 30215	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer TheCompleteInsuranceSource Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00	

C.	Full Name (Last, First, Middle Initial) Mr. William C. Anderson	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 205 Whippoorwill Ln	Transaction ID: 8856035
	City State Zip Code Altamonte Spgs FL 32701-7827	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Rogers Benefit Group Occupation Field Sales Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 401.00	

SUBTOTAL of Receipts This Page (optional)	150.50
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 16 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Mark B. Schwendeman

Mailing Address 427 4th St

City State Zip Code
Marietta OH 45750-2004

FEC ID number of contributing federal political committee. C

Name of Employer
The Schwendeman Agency IN-C.

Occupation
PRESIDENT\oWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2009

Transaction ID: 8856037

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert M. Nelson

Mailing Address 14712 Shirley Street

City State Zip Code
Omaha NE 68144-2144

FEC ID number of contributing federal political committee. C

Name of Employer
Grace-Mayer Ins. Agency

Occupation
Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2009

Transaction ID: 8856047

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard L. Hill

Mailing Address 2611 Alvo Road

City State Zip Code
Seward NE 68434

FEC ID number of contributing federal political committee. C

Name of Employer
Unico Financial Services, Inc.

Occupation
General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2009

Transaction ID: 8856053

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) 122.00

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 17 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. John W. Bounds

Mailing Address 1434 South Lamar Blvd.

City State Zip Code
Oxford MS 38655-4738

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

Name of Employer: Bounds & Associates Occupation: Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8856057
Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial)
Mr. Brian R. Phares

Mailing Address 1420 Hackberry Road

City State Zip Code
North Platte NE 69101-6841

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

Name of Employer: Phares Financial Services Occupation: Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8856085
Amount of Each Receipt this Period: 62.50

C. Full Name (Last, First, Middle Initial)
Mr. John R. Dean

Mailing Address 1700 S.W. 15th Ave.

City State Zip Code
Willmar MN 56201

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

Name of Employer: Affiliated Financial Services Inc. Occupation: President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8856093
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 154.50

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 18 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Carl James Maus

Mailing Address 432 Fort Saratoga

City State Zip Code
Saint Charles MO 63303-1766

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

Name of Employer Insurance and Investment Services
Occupation Career Development Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856101

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. David A. Middaugh

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 Middaugh & Associates, Inc.
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2995.20

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856103

Amount of Each Receipt this Period
249.60

C. Full Name (Last, First, Middle Initial)
Mr. Eugene H. Burkett

Mailing Address PO Box 921

City State Zip Code
Felton CA 95018-0921

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

Name of Employer Insurance Link
Occupation Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856109

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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 19 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City State Zip Code
Carmichael CA 95608

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

Name of Employer Occupation
NAIFA - California Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856113

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. William N. Haraway

Mailing Address 113 Fairview Ave

City State Zip Code
Frederick MD 21701-4017

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

Name of Employer Occupation
Haraway Financial Services Financial Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856115

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Ms. Kelli J. Carmichael

Mailing Address 2914 S Coffman

City State Zip Code
Casper WY 82604-4733

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

Name of Employer Occupation
Lincoln Financial Advisors Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856129

Amount of Each Receipt this Period
22.50

SUBTOTAL of Receipts This Page (optional) ► **106.50**

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 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City State Zip Code
Tupelo MS 38801

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
United American Insurance Co. Branch Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856153

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City State Zip Code
Los Altos CA 94022-2354

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Vita Companies Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856161

Amount of Each Receipt this Period 42.50

C.

Full Name (Last, First, Middle Initial)
Mr. Karl Erik Hansen

Mailing Address 900 North Shoreline Boulevard

City State Zip Code
Mountain View CA 94043-1933

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Vita Companies Brokerage Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856165

Amount of Each Receipt this Period 42.50

SUBTOTAL of Receipts This Page (optional) 135.00

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 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Johnny Jon Johnson

Mailing Address 3770 N Frandon Avenue

City State Zip Code
Meridian ID 83646

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

Name of Employer Regence BlueShield of Idaho
Occupation Boise District Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856169

Amount of Each Receipt this Period
27.00

B.

Full Name (Last, First, Middle Initial)
Mr. T. Leslie Littleton

Mailing Address 1025 E. Austin

City State Zip Code
Nacogdoches TX 75965-2964

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

Name of Employer
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 762.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856185

Amount of Each Receipt this Period
60.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Salscheider

Mailing Address 1378 Willow Ln. S.W.

City State Zip Code
Rochester MN 55902-1811

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

Name of Employer Prime Time Health Advisors LLC
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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856187

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► **99.50**

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 22 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Mark R. Warren

Mailing Address 3603 Grandview

City State Zip Code
Plainview TX 79072-6625

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

Name of Employer Warren Insurance Services Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856193

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bruce H. Kantor

Mailing Address 2901 Cross Country Rd

City State Zip Code
Charlotte NC 28270-0600

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

Name of Employer Kantor & Associates Occupation BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 277.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856195

Amount of Each Receipt this Period
23.10

C.

Full Name (Last, First, Middle Initial)
Ms. Sally A. Bisgard

Mailing Address 529 N. Main

City State Zip Code
Waubay SD 57273

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

Name of Employer Thrivent Financial for Lutherans Occupation District Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856221

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **94.10**

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 23 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Frank R. Nolimal

Mailing Address 2017 Grafton Ave

City Henderson State NV Zip Code 89014

FEC ID number of contributing federal political committee. C

Name of Employer Assurance Ltd Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856225

Amount of Each Receipt this Period 60.00

B. Full Name (Last, First, Middle Initial)
Mr. Hollis O. Inglett, Jr.

Mailing Address 31 Cone Rd

City Ormond Beach State FL Zip Code 32174-7903

FEC ID number of contributing federal political committee. C

Name of Employer Hayward Brown Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856249

Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Laster

Mailing Address 1713 Elmhurst Ave

City Nichols Hills State OK Zip Code 73120

FEC ID number of contributing federal political committee. C

Name of Employer Rogers Benefit Group Occupation Regional Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856251

Amount of Each Receipt this Period 50.40

SUBTOTAL of Receipts This Page (optional) 152.40

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 24 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. William E. Mahoney, Jr.	Date of Receipt MM / DD / YYYY 12 / 03 / 2009
	Mailing Address 936 Intracoastal Dr 14F	Transaction ID: 8856261
	City State Zip Code Fort Lauderdale FL 33304-3666	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Mahoney and Associates Occupation Insurance Agent 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) Mr. Lawrence D. Bos, Jr.	Date of Receipt MM / DD / YYYY 12 / 03 / 2009
	Mailing Address 85 Campau NW PO Box 295	Transaction ID: 8856263
	City State Zip Code Grand Rapids MI 49501-0295	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Northwestern Mutual Occupation Insurance Agent 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) Mr. Mitchell B. Glover	Date of Receipt MM / DD / YYYY 12 / 03 / 2009
	Mailing Address 6700 Old Darby Trail	Transaction ID: 8856293
	City State Zip Code Ada MI 49301-8360	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Northwestern Mutual Financial Network Occupation Managing Partner 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)	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: PAGE 25 / 234
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial) Mr. Bradley A. Peete		Date of Receipt
Mailing Address 100 Elmwood Terrace		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 0 9
City State Zip Code Greensboro NC 27408		Transaction ID: 8856299
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 275.00
Name of Employer Northwestern Mutual Financial Network	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 275.00	

B.

Full Name (Last, First, Middle Initial) Mr. James A. Shalek		Date of Receipt
Mailing Address 1706 Candleberry Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 0 9
City State Zip Code Yorkville IL 60560-5810		Transaction ID: 8856303
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 10.00
Name of Employer Principal Financial Group	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 835.00	

C.

Full Name (Last, First, Middle Initial) Mr. Tobin Carl Hoffmann		Date of Receipt
Mailing Address 447 S Seguin Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 4 / 2 0 0 9
City State Zip Code New Braunfels TX 78130-7642		Transaction ID: 8856317
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period <input type="text"/> 250.00
Name of Employer Union Central Life Insurance Company	Occupation Certified Financial Planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 535.00
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: (check only one)	PAGE 26 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. John S. McMahon	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 77 Vancouver Ave.	Transaction ID: 8856339
	City State Zip Code Warwick RI 02886-2836	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer ING Life Insurance & Annuity Company	Occupation Financial Services Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.20	

B.	Full Name (Last, First, Middle Initial) Ms. Charmaine Uhrig	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address RR 1 Box 273A	Transaction ID: 8856363
	City State Zip Code Minatare NE 69356-9693	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer State Farm Insurance	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Gary Lee Eckelkamp	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 6940 Houser Rd	Transaction ID: 8856379
	City State Zip Code Paducah KY 42003-8793	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Life Insurance Company	Occupation Exclusive Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.20	

SUBTOTAL of Receipts This Page (optional)	540.20
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 27 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Tom A. Keith

Mailing Address 138 Maxey Road

City State Zip Code
Longview TX 75605

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

Name of Employer Allstate Life Insurance Company
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856395

Amount of Each Receipt this Period
17.50

B.

Full Name (Last, First, Middle Initial)
Mr. Claude A. Marlowe, Jr.

Mailing Address 1101 Radcliffe Avenue

City State Zip Code
Kingsport TN 37664-2025

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

Name of Employer American General Life & Accident Insur
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856427

Amount of Each Receipt this Period
21.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bob Buxman

Mailing Address 12690 NW Lorraine Dr

City State Zip Code
Portland OR 97229

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

Name of Employer NAIFA - Oregon
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856453

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **59.50**

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 28 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Raymond M. White

Mailing Address 24 Reverend Houston Drive

City State Zip Code
Bedford NH 03110-5023

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

Name of Employer
Cornerstone Benefit & Retirement Group

Occupation
President/Owner

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: 8856461

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. John H. Myaard

Mailing Address 4060 Spring Beauty Lane

City State Zip Code
Holland MI 49423

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

Name of Employer
Northwestern Mutual

Occupation
General Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: 8856469

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ms. Bonnie L. Smith

Mailing Address 3412 Circle Dr

City State Zip Code
Flint MI 48507-1820

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

Name of Employer
Creative Financial Centre

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
1 2 / 0 7 / 2 0 0 9

Transaction ID: 8856515

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

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 29 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. William W. Meacham

Mailing Address PO Box 1848

City State Zip Code
Bellevue WA 98009-1848

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

Name of Employer Occupation
Meacham Financial Inc. OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2009

Transaction ID: 8856523

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. John M. Qualy

Mailing Address 625 S. Skinker #1203

City State Zip Code
St. Louis MO 63105-2301

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

Name of Employer Occupation
Northwestern Mutual General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2009

Transaction ID: 8856541

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Larry M. Jacobson

Mailing Address 2304 Tamaroc Drive

City State Zip Code
Sioux Falls SD 57103-5252

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

Name of Employer Occupation
American Family Life Insurance Company Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856553

Amount of Each Receipt this Period
23.00

SUBTOTAL of Receipts This Page (optional) ▶ **573.00**

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 30 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr. Frederic R. Marschner		Date of Receipt MM / DD / YYYY 12 / 07 / 2009
Mailing Address 51 Fieldbrook Place		Transaction ID: 8856559
City Moraga	State CA	Zip Code 94556-1101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Northwestern Mutual	Occupation Financial Representative	
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) Mr. Henry L Prien		Date of Receipt MM / DD / YYYY 12 / 10 / 2009
Mailing Address 415 38th St S Ste E		Transaction ID: 8856565
City Fargo	State ND	Zip Code 58103-1190
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.40
Name of Employer American Family Life Insurance Co.	Occupation District Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.80	

C.

Full Name (Last, First, Middle Initial) Mr. Edwin R. Hamilton		Date of Receipt MM / DD / YYYY 12 / 10 / 2009
Mailing Address 4318 Council Circle		Transaction ID: 8856567
City Jackson	State MS	Zip Code 39206-5819
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.00
Name of Employer American General	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	▶	321.40
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 31 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Michael E. Eibeck

Mailing Address 7521 E Via Estrella

City State Zip Code
Scottsdale AZ 85258-1121

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

Name of Employer Spence, Cassidy Associates Occupation Associate General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856573

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Mr. Paul R. Decker

Mailing Address Box 1832

City State Zip Code
Idaho Falls ID 83403-1832

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

Name of Employer Beneficial Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856585

Amount of Each Receipt this Period
50.40

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth P. Gross, II

Mailing Address 8201 Sharonway Ct.

City State Zip Code
Glen Allen VA 23060-3264

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

Name of Employer Capitol Financial Solution Occupation Senior Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: 8856591

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **315.40**

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 32 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

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

Mailing Address 3619 S 55th St

City State Zip Code
Omaha NE 68106-4415

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

Name of Employer Occupation
Ameritas Life Insurance 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856607

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Mr. Barry K. Rake

Mailing Address 1004 Dawne Dr

City State Zip Code
Williamsport PA 17701

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

Name of Employer Occupation
Kent A. Bennett & Associates AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856609

Amount of Each Receipt this Period
25.00

C.

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

Mailing Address P. O. Box 1555

City State Zip Code
ENKA NC 28728-1555

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

Name of Employer Occupation
J.W. Oglesby & Associates Senior Sales Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1628.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856629

Amount of Each Receipt this Period
143.00

SUBTOTAL of Receipts This Page (optional) ► **293.00**

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 33 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Thomas D. Currey

Mailing Address 701 W. Church St

City State Zip Code
Grand Prairie TX 75050

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

Name of Employer Occupation
TDC Financial Services General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 857.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856633

Amount of Each Receipt this Period
208.00

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

Mailing Address 10000 Stony Point

City State Zip Code
Waco TX 76712-3172

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

Name of Employer Occupation
Ohio National Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856639

Amount of Each Receipt this Period
19.00

C. Full Name (Last, First, Middle Initial)
Mr. Walter C. Sprye, Jr.

Mailing Address 1305 Portside Drive

City State Zip Code
Wilmington NC 28405

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

Name of Employer Occupation
AXA Advisors, LLC Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 554.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856641

Amount of Each Receipt this Period
46.20

SUBTOTAL of Receipts This Page (optional) ► **273.20**

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 34 / 234
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Ms. Donna J. Burrill

Mailing Address P.O.BOX 143

City State Zip Code
FORT COLLINS CO 80522-0143

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

Name of Employer Occupation
Burrill Financial Service AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856643

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jeff L. Holland

Mailing Address 200 Matthew Dr

City State Zip Code
Paducah KY 42001-6162

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

Name of Employer Occupation
HollandStivers & Assoc., LLC Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856647

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 10234 Hoffman

City State Zip Code
Maybee MI 48159-9777

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

Name of Employer Occupation
Lincoln Financial Network AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856655

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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 35 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Frank H. Briggs, Jr.

Mailing Address 2610 Bohler Rd NW

City State Zip Code
Atlanta GA 30327-1418

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

Name of Employer Occupation
Briggs & Associates/AXA Financial Consultant
Advisors, LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

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

Transaction ID: 8856679

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Mr. William A. Carlisle

Mailing Address 2356 Hawkhurst

City State Zip Code
Memphis TN 38119

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

Name of Employer Occupation
UCL Financial Group Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 8856701

Amount of Each Receipt this Period

17.50

C.

Full Name (Last, First, Middle Initial)
Ms. Laurie A. Adams

Mailing Address 609 E. Jefferson

City State Zip Code
Washington IL 61571-1551

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

Name of Employer Occupation
Country Financial Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 351.00

Date of Receipt

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

Transaction ID: 8856713

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

109.50

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 36 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Elwood B. Syverson

Mailing Address 509 Loomis Drive

City State Zip Code
Mauston WI 53948-1522

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

Name of Employer Occupation
The Rural Insurance Co's Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856717

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric S. Roth

Mailing Address 2 Mckinley Ct.

City State Zip Code
Monroe Twp NJ 08831-4055

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

Name of Employer Occupation
Smith Barney Vice President- Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.50

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856737

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Mr. Troy D. DeLair

Mailing Address 841 E 3550 N

City State Zip Code
North Ogden UT 84414-7596

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

Name of Employer Occupation
Farm Bureau Financial Services Career Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856739

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **97.50**

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 37 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. William J. Lynch

Mailing Address 5075 SW Griffith Dr. #200

City State Zip Code
Beaverton OR 97005

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

Name of Employer Occupation
Farmers Insurance General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

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

Transaction ID: 8856749

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City State Zip Code
Boise ID 83706-5095

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

Name of Employer Occupation
Erstad & Company President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 604.80

Date of Receipt

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

Transaction ID: 8856777

Amount of Each Receipt this Period

50.40

C.

Full Name (Last, First, Middle Initial)
Mr. Michael O. Brown

Mailing Address 6512 NE 113

City State Zip Code
Edmond OK 73013-8351

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

Name of Employer Occupation
MassMutual Financial Group AGENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

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

Transaction ID: 8856795

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional) ▶

160.40

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Charles W. Potts

Mailing Address 12725 St. Andrews Ter

City State Zip Code
Oklahoma City OK 73120-8807

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

Name of Employer: MassMutual Financial Group
Occupation: Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856797

Amount of Each Receipt this Period
36.00

B.

Full Name (Last, First, Middle Initial)
Mr. John H. Stupey

Mailing Address 5404 33rd Ave W

City State Zip Code
Everett WA 98203-1346

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

Name of Employer: MassMutual Financial Group
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856805

Amount of Each Receipt this Period
17.50

C.

Full Name (Last, First, Middle Initial)
Mr. Matthew S. Huntington

Mailing Address 2598 S. Oswego Street

City State Zip Code
Aurora CO 80014-1814

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

Name of Employer: Farmers Ins. Group
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856825

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **74.50**

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 39 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mrs. Lynda D. Turner

Mailing Address 1070 S Bosque Loop

City State Zip Code
Bosque Farms NM 87068-9063

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

Name of Employer AXA Advisors, LLC Occupation Registered Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 241.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856835

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. Herbert F. Mischke

Mailing Address 322 East County Road D

City State Zip Code
Little Canada MN 55117

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

Name of Employer Blaeser Mischke Financial Group Inc. Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856837

Amount of Each Receipt this Period
21.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronald T. Staebell

Mailing Address 4309 Town Park Pl.

City State Zip Code
Sioux Falls SD 57105-7116

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

Name of Employer The Principal Financial Group Occupation Senior Financial Services Representati

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856839

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **72.00**

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 40 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Darren Scott Mason

Mailing Address 178 Shorecliff Rd

City State Zip Code
Corona del Mar CA 92625-2648

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

Name of Employer Occupation
Advanced Benefit Systems General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.92

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856859

Amount of Each Receipt this Period
41.66

B. Full Name (Last, First, Middle Initial)
Mr. Stewart N. Isbell

Mailing Address 12101 Woodruff Ave, Ste D

City State Zip Code
Downey CA 90241-5628

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

Name of Employer Occupation
Farmers Insurance Group Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856869

Amount of Each Receipt this Period
26.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael J. Wilcox

Mailing Address 117 Great Brook Rd.

City State Zip Code
New Milford CT 06776-3039

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

Name of Employer Occupation
MetLife Financial Services Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8856877

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 92.66

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 41 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. James O. Geitgey

Mailing Address 279 Glenmore Dr.

City Springfield State OH Zip Code 45503

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

Name of Employer Geitgey Financial Services Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8856915

Amount of Each Receipt this Period 42.50

B. Full Name (Last, First, Middle Initial)
Mr. Stephen D. Estler

Mailing Address 2177 NE 63 St.

City Fort Lauderdale State FL Zip Code 33308-1330

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

Name of Employer Mass Mutual Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.50

Date of Receipt 12 / 10 / 2009

Transaction ID: 8856921

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary T. Wolff

Mailing Address 131 Barstow Lane

City Tolland State CT Zip Code 06084-2547

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

Name of Employer Valmark Securities, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8856925

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 112.50

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 42 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Clark

Mailing Address 1603 22nd St Ste 202

City State Zip Code
West Des Moines IA 50266-1410

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

Name of Employer Occupation
Compensation Designs General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

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

Transaction ID: 8856929

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard D. Vonderlage

Mailing Address 15202 Sprague St

City State Zip Code
Omaha NE 68116

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

Name of Employer Occupation
Heritage Financial Svcs. Financial Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 504.00

Date of Receipt

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

Transaction ID: 8856955

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald F. Kramer

Mailing Address PO Box 26

City State Zip Code
Pierce NE 68767-0026

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

Name of Employer Occupation
Ron Kramer Insurance AGENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.50

Date of Receipt

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

Transaction ID: 8856973

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional) ▶

124.50

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 43 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Debbie K. Paul

Mailing Address 4001 MacArthur Blvd Suite 300

City State Zip Code
Newport Beach CA 92660-2510

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

Name of Employer Occupation
Securian Financial Network Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856975

Amount of Each Receipt this Period
42.50

B.

Full Name (Last, First, Middle Initial)
Mr. Joel K. Williamson

Mailing Address 1750 Cord 16

City State Zip Code
Tulsa TX 79088

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

Name of Employer Occupation
Financial Solutions Financial Solutions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856991

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth E. Knox

Mailing Address Unit 9, 10 East St

City State Zip Code
Providence RI 02906-3069

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

Name of Employer Occupation
Penn Mutual Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856995

Amount of Each Receipt this Period
50.40

SUBTOTAL of Receipts This Page (optional) ► **122.90**

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 44 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Theodore H. Heidrich

Mailing Address 2 Acorn Ln

City State Zip Code
Scarborough ME 04074-7518

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

Name of Employer Occupation
Modern Woodmen of America Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8856999

Amount of Each Receipt this Period
27.00

B.

Full Name (Last, First, Middle Initial)
Mr. David S. Dickenson, II

Mailing Address 7535 Brigham Road

City State Zip Code
Gates Mills OH 44040-9782

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

Name of Employer Occupation
Dickenson & Associates General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857001

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. John C. Beckwith

Mailing Address 1908 Greenbriar Dr

City State Zip Code
Portage MI 49024-5787

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

Name of Employer Occupation
Ohio National Fin. Services General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857019

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► **81.50**

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 45 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Carl G. Boutwell, Jr.
Mailing Address 109 Fern Dr
City State Zip Code
Brandon MS 39042
FEC ID number of contributing federal political committee. **C**
Name of Employer Carl Boutwell Agency Occupation AGENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 560.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8857027
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Andre L. Faucher
Mailing Address 46 Osprey Circle
City State Zip Code
Palm Coast FL 32137
FEC ID number of contributing federal political committee. **C**
Name of Employer Andre L. Faucher CLU Occupation Financial Consultant
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8857029
Amount of Each Receipt this Period 21.00

C. Full Name (Last, First, Middle Initial)
Mr. Glen L. Baecker
Mailing Address 1451 E. FM 1961
City State Zip Code
Goliad TX 77963-3498
FEC ID number of contributing federal political committee. **C**
Name of Employer National Farm Life Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8857055
Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional) ► 92.00
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 46 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Douglas E. Aycock

Mailing Address 5113 Southwest Pkwy # 200

City State Zip Code
Austin TX 78735-8915

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

Name of Employer Occupation
Aycock Financial Group Employee Benefit Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 510.00

Date of Receipt

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

Transaction ID: 8857059

Amount of Each Receipt this Period
42.50

B.

Full Name (Last, First, Middle Initial)

Mr. M. Jay Einstein

Mailing Address 59 Margarete Dr.

City State Zip Code
Pittsgrove NJ 08318-3015

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

Name of Employer Occupation
South Jersey General Office General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 864.00

Date of Receipt

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

Transaction ID: 8857067

Amount of Each Receipt this Period
72.00

C.

Full Name (Last, First, Middle Initial)

Mr. H. Larry Fortenberry

Mailing Address 123 Northshore Pt

City State Zip Code
Madison MS 39110-7272

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

Name of Employer Occupation
Executive Planning Group President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt

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

Transaction ID: 8857077

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)

124.50

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 47 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Troy J. Shreve

Mailing Address 7100 S 45th Street

City Lincoln State NE Zip Code 68516-3016

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

Name of Employer Benefit Management Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8857085

Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Mr. H. Keith de Noble

Mailing Address 36308 Highway 300

City Bigelow State AR Zip Code 72016

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

Name of Employer H. Keith de Noble Ins. Agency, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 558.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8857097

Amount of Each Receipt this Period 51.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bryon A. Holz

Mailing Address 207 Cindy Ln

City Brandon State FL Zip Code 33510-3905

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

Name of Employer Bryon Holz & Associates Occupation Independent Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 555.50

Date of Receipt 12 / 10 / 2009

Transaction ID: 8857101

Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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 48 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Barry A. Cook		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address 509 West Fellars Dr		Transaction ID: 8857141		
	City Phoenix	State AZ	Zip Code 85023-3560	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer New York Life		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

B.	Full Name (Last, First, Middle Initial) Mr. Ben Kronish		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address 205 W 89th St #2H		Transaction ID: 8857143		
	City New York	State NY	Zip Code 10024-1829	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Kronish Associates		Occupation AGENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

C.	Full Name (Last, First, Middle Initial) Mr. Arthur Ivan Swanson		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address 2270 E. 24TH PL		Transaction ID: 8857147		
	City Yuma	State AZ	Zip Code 85365-3245	Amount of Each Receipt this Period 25.20	
	FEC ID number of contributing federal political committee. C				
Name of Employer New York Life		Occupation AGENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 302.40			

SUBTOTAL of Receipts This Page (optional)	▶	65.20
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 49 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. J. Scott Connoles

Mailing Address P.O. Box 5564

City State Zip Code
Helena MT 59604-5564

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

Name of Employer Occupation
Farmers Insurance Group Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.00

Date of Receipt

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

Transaction ID: 8857155

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Randall C. Wimsatt

Mailing Address 4400 Hannon Dr

City State Zip Code
Farmington NM 87402-8718

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

Name of Employer Occupation
ING Financial Partners District Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.40

Date of Receipt

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

Transaction ID: 8857157

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. William J. Brannon

Mailing Address 5215 Mockingbird Road

City State Zip Code
Greensboro NC 27406

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

Name of Employer Occupation
Group U.S., Inc. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 277.20

Date of Receipt

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

Transaction ID: 8857159

Amount of Each Receipt this Period

23.10

SUBTOTAL of Receipts This Page (optional)

73.50

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 50 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Wayne E. Thomas	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 29 Cycas Drive	Transaction ID: 8857161
	City State Zip Code Kenner LA 70065	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Thomas Financial Group	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

B.	Full Name (Last, First, Middle Initial) Ms. Shelly D. Pensky	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 2855 S. 4th Avenue #118	Transaction ID: 8857183
	City State Zip Code Yuma AZ 85364-8150	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Farmers Insurance Group	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Mr. Steven M. Daniel	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 2600 Meadowbrook Dr	Transaction ID: 8857187
	City State Zip Code Butte MT 59701-4028	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
Name of Employer Daniel Financial Services, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.40	

SUBTOTAL of Receipts This Page (optional)	▶	76.20
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 51 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

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

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 D'Addona Rosenbaum Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1775.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857193

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City State Zip Code
New York NY 10014-7200

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

Name of Employer Weiser Capital Management LLC Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857197

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lanny D. Levin

Mailing Address 313 Laurel

City State Zip Code
Highland Park IL 60035-2619

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

Name of Employer Lanny D. Levin Agency, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857203

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **292.00**

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 52 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Carol A. Anderson

Mailing Address 717 N. 87th St.

City State Zip Code
Omaha NE 68114

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

Name of Employer Sharp Anderson Arena Curnes & Assoc
Occupation Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857217

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark V. Snider

Mailing Address 44 Elmwood Place

City State Zip Code
Athens OH 45701-1904

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

Name of Employer Snider, Fuller & Associates
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857223

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln
PO Box 2433

City State Zip Code
Cody WY 82414-2433

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

Name of Employer Taggart Company
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857227

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **142.00**

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 53 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Stewart E. Meyers, Jr.
Mailing Address P.O. Box 18205

City State Zip Code
Oklahoma City OK 73154-0205

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

Name of Employer: Meyers Life Agency, Inc. Occupation: President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 244.80

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8857231
Amount of Each Receipt this Period: 20.40

B. Full Name (Last, First, Middle Initial)
Mr. William V. Irons
Mailing Address 150 Prospect Rd

City State Zip Code
Wakefield RI 02879-7044

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

Name of Employer: Irons & Associates Occupation: President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8857257
Amount of Each Receipt this Period: 25.20

C. Full Name (Last, First, Middle Initial)
Mr. Richard Lee Harlow
Mailing Address 12250 Angel Wing Ct

City State Zip Code
Reston VA 20191-1102

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

Name of Employer: The Harlow Group, LLC Occupation: Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8857261
Amount of Each Receipt this Period: 42.00

SUBTOTAL of Receipts This Page (optional) ► 87.60

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 54 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Gary A. Bramon

Mailing Address 269 San Felipe Way

City State Zip Code
Novato CA 94945-1687

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

Name of Employer Occupation
Alders Financial Solutions General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857281

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Barton C. Pasco

Mailing Address 908 Palace Way #A

City State Zip Code
Richmond VA 23238

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

Name of Employer Occupation
Pasco Financial Group, LLC President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857285

Amount of Each Receipt this Period
60.00

C.

Full Name (Last, First, Middle Initial)
Mr. Stephen G. Summerlin

Mailing Address 4014 N. W. 15th Street

City State Zip Code
Gainesville FL 32605-1912

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

Name of Employer Occupation
Summerlin Financial Advisors, Inc. Certified Financial Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857291

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **152.00**

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 55 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald G. Hester

Mailing Address 261 New River Heights Rd.

City State Zip Code
Boone NC 28607

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

Name of Employer Occupation
Lincoln Financial Network AGENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 671.00

Date of Receipt

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

Transaction ID: 8857297

Amount of Each Receipt this Period

46.75

B.

Full Name (Last, First, Middle Initial)

Mr. Marcus T. Henderson, Sr.

Mailing Address 109 Barrington Court East

City State Zip Code
Franklin TN 37067

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

Name of Employer Occupation
Henderson Financial Group, Inc. President & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 462.00

Date of Receipt

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

Transaction ID: 8857301

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Forrest C. Galyean

Mailing Address 3236 Polo Road

City State Zip Code
Winston Salem NC 27106-4827

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

Name of Employer Occupation
First Citizens Bank Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

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

Transaction ID: 8857311

Amount of Each Receipt this Period

13.75

SUBTOTAL of Receipts This Page (optional) ▶

102.50

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 56 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Gregory D. Turner

Mailing Address 1208 Sherwood Dr.

City State Zip Code
Oxford AL 36203

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

Name of Employer Insurance Planning Services
Occupation PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.50

Date of Receipt

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

Transaction ID: 8857329

Amount of Each Receipt this Period
12.50

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

Mailing Address 4632 Mountain Park Rd.

City State Zip Code
Pocatello ID 83202-1702

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

Name of Employer University Financial Group
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1512.00

Date of Receipt

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

Transaction ID: 8857333

Amount of Each Receipt this Period
126.00

C. Full Name (Last, First, Middle Initial)
Mr. Duane W. Biede

Mailing Address 1705 Highland Dr.

City State Zip Code
Hasting NE 68901-2426

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

Name of Employer
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

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

Transaction ID: 8857341

Amount of Each Receipt this Period
22.50

SUBTOTAL of Receipts This Page (optional) ► **161.00**

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 57 / 234
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Douglas B. Massey	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 3115 Southwest Blvd.	Transaction ID: 8857353
	City State Zip Code San Angelo TX 76904-5772	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
Name of Employer Doug Massey Financial Services	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

B.	Full Name (Last, First, Middle Initial) Mr. Thomas F. Flournoy, Jr.	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 5300 Zebulon Rd	Transaction ID: 8857367
	City State Zip Code Macon GA 31210-2199	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
Name of Employer New York Life	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

C.	Full Name (Last, First, Middle Initial) Mr. Daryl W. Broberg	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 1531 3rd St.	Transaction ID: 8857371
	City State Zip Code Sutherland NE 69165	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Life Investor Ins. G. of America	Occupation Areas Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	109.50
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 58 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffery J. Johnston

Mailing Address 1425 Lakeside Ct

City State Zip Code
Yakima WA 98902-7354

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

Name of Employer Occupation
New York Life 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
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857373

Amount of Each Receipt this Period
42.50

B.

Full Name (Last, First, Middle Initial)
Mr. Dennis A. Brumbaugh

Mailing Address 17 Conley Lane

City State Zip Code
Elma WA 98541

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

Name of Employer Occupation
Brumbaugh Insurance Services AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857409

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Mr. Berge A. Borrevik

Mailing Address 10727 North Elma Drive

City State Zip Code
Spokane WA 99218-2432

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

Name of Employer Occupation
New York Life AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857415

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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 59 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. R. Art Lubomski

Mailing Address 4137 Beech Ave

City State Zip Code
Erie PA 16508-3118

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

Name of Employer Occupation
Lincoln Financial Network Registered Rep.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt

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

Transaction ID: 8857423
 Amount of Each Receipt this Period
 21.00

B. Full Name (Last, First, Middle Initial)
Mr. Gordon T. Colburn

Mailing Address 126 Crystal Springs Road

City State Zip Code
San Dimas CA 91773-1116

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

Name of Employer Occupation
Colburn Ins. Services, In- c. President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 510.00

Date of Receipt

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

Transaction ID: 8857427
 Amount of Each Receipt this Period
 42.50

C. Full Name (Last, First, Middle Initial)
Mr. George B. Bryce

Mailing Address 2730 Ardon Ln

City State Zip Code
Casper WY 82609-3902

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

Name of Employer Occupation
The Insurance Agency General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 504.00

Date of Receipt

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

Transaction ID: 8857437
 Amount of Each Receipt this Period
 42.00

SUBTOTAL of Receipts This Page (optional) ► **105.50**

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 60 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Steven Paul Cassel

Mailing Address 12706 Fowler Cir

City State Zip Code
Omaha NE 68164-1725

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

Name of Employer Occupation
Lincoln Financial Advisors Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857443

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. Aldous Kawaiiani Paalani

Mailing Address 51-316 A Kamehameha Hwy.

City State Zip Code
Kaaawa HI 96730

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

Name of Employer Occupation
Equity Insurance Services, Inc Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857449

Amount of Each Receipt this Period
62.50

C. Full Name (Last, First, Middle Initial)
Mr. Martin Montefel

Mailing Address 16932 SW 5th Way

City State Zip Code
Weston FL 33326-1564

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

Name of Employer Occupation
Marty Montefel General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857461

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **133.50**

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 61 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard L. Stone

Mailing Address 617 N Paxton Street

City State Zip Code
Alexandria VA 22304-2735

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

Name of Employer Occupation
Lifetime Benefits 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
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857467

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Mr. Dee K. Carter

Mailing Address 3207 Baumann

City State Zip Code
Midland TX 79701-5515

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

Name of Employer Occupation
Carter Financial Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857481

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Mr. James R. Coviello

Mailing Address 3412 Valley Road

City State Zip Code
Winston Salem NC 27106-2529

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857491

Amount of Each Receipt this Period
23.10

SUBTOTAL of Receipts This Page (optional) ► **40.60**

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 62 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Anthony D. Miller

Mailing Address 4502 Hi-Line Dr

City State Zip Code
Billings MT 59106

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

Name of Employer Retirement Solutions Occupation Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857495

Amount of Each Receipt this Period
50.40

B.

Full Name (Last, First, Middle Initial)
Mr. Robert D. Thunselle

Mailing Address 4020 Gannett #3

City State Zip Code
Casper WY 82609-2351

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

Name of Employer Thrivent Financial Occupation District Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 337.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857503

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Angelo Assad Haddad

Mailing Address 354 Garnsey Ave

City State Zip Code
Bakersfield CA 93309-1849

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

Name of Employer New York Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857507

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **122.90**

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 63 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John W. Collier

Mailing Address 4600 Kietzke Ln
Ste D134

City State Zip Code
Reno NV 89502

FEC ID number of contributing federal political committee.

C

Name of Employer
American General Financial Group

Occupation
General Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

439.20

Date of Receipt

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

Transaction ID: 8857521

Amount of Each Receipt this Period

9.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ken Simons

Mailing Address 808 Thoroughbred Lane

City State Zip Code
Artesia NM 88210-9373

FEC ID number of contributing federal political committee.

C

Name of Employer
New York Life Insurance

Occupation
General Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

601.20

Date of Receipt

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

Transaction ID: 8857535

Amount of Each Receipt this Period

50.10

C.

Full Name (Last, First, Middle Initial)

Mr. Verne D. Brakke

Mailing Address 624 N Jackson

City State Zip Code
Pierre SD 57501-2314

FEC ID number of contributing federal political committee.

C

Name of Employer
New York Life

Occupation
Insurance Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: 8857537

Amount of Each Receipt this Period

17.50

SUBTOTAL of Receipts This Page (optional)

76.60

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 64 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Rockett, Jr.

Mailing Address 1221 Willapa First St

City State Zip Code
Raymond WA 98577

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

Name of Employer Occupation
R & S Financial 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
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857539

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Lawrence L. Kitts

Mailing Address 10842 Mount CurveRd

City State Zip Code
Eden Prairie MN 55347-2908

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

Name of Employer Occupation
Horizon Agency Inc. Agency Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1102.00

Date of Receipt

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

Transaction ID: 8857563

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory M. Telge

Mailing Address 1655 North River Road

City State Zip Code
Manchester NH 03104

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

Name of Employer Occupation
Northwestern Mutual OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt

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

Transaction ID: 8857571

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

92.00

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 65 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Charles E. Jackson, Jr.

Mailing Address 53 Jordan Lane

City State Zip Code
Mobile AL 36608-2624

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

Name of Employer: McNeil, Jackson, Ahrens Financial Grou
Occupation: Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8857583
Amount of Each Receipt this Period: 42.50

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

Mailing Address 5716 W Orlando Cir

City State Zip Code
Broken Arrow OK 74011-1149

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

Name of Employer: Northwestern Mutual
Occupation: AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8857585
Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
Ms. Alicia S. Burst

Mailing Address 960 Ponte Vedra Boulevard

City State Zip Code
Ponte Vedra Bch FL 32082

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

Name of Employer: APPS
Occupation: Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8857615
Amount of Each Receipt this Period: 21.00

SUBTOTAL of Receipts This Page (optional) ► 123.50

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 66 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Thomas D. McNeil

Mailing Address 49 Hagen Oaks Ct

City Alamo State CA Zip Code 94507-2206

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

Name of Employer Midland National Life Occupation Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8857621

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Ms. Laura P. DeGolier

Mailing Address 114 S. Main Street
PMB 301

City Fond Du Lac State WI Zip Code 54935-4229

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

Name of Employer DeGolier Insurance Services, LLC Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 392.40

Date of Receipt 12 / 10 / 2009

Transaction ID: 8857625

Amount of Each Receipt this Period 37.20

C. Full Name (Last, First, Middle Initial)
Mr. Donald C. Jayne

Mailing Address 20402 Tulsa Street

City Chatsworth State CA Zip Code 91311-1723

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

Name of Employer Executive Financial Systems Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8857631

Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 104.20

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 67 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Katharine F. Clark

Mailing Address 110 Cross Creek Circle

City State Zip Code
Macon GA 31210

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

Name of Employer Occupation
Peachtree Planning Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857637

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Keith M. Gillies

Mailing Address 109 W. Lakeview Dr.

City State Zip Code
La Place LA 70068-2427

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

Name of Employer Occupation
River Parishes Advisors Managing Director
Group, LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1629.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857643

Amount of Each Receipt this Period
208.00

C. Full Name (Last, First, Middle Initial)
Ms. Barbara E. Gunnell

Mailing Address 94903 Country Ln.

City State Zip Code
Coos Bay OR 97420

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

Name of Employer Occupation
Gunnell Insurance Agency Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 237.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857649

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► 245.50

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 68 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Stephen R. McNeely

Mailing Address 6190 Winford Dr

City State Zip Code
Indianapolis IN 46236-8378

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

Name of Employer Occupation
Motorists Life Ins. Co. MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857655

Amount of Each Receipt this Period
22.50

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory S. Anderson

Mailing Address 2187 Eagle Trace Ln.

City State Zip Code
Woodbury MN 55129

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

Name of Employer Occupation
NMFN/The Bohannon Group Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857657

Amount of Each Receipt this Period
22.50

C.

Full Name (Last, First, Middle Initial)
Mr. Douglas Austin

Mailing Address Suite 9 Kite Hill Rd

City State Zip Code
Santa Cruz CA 95060-1418

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

Name of Employer Occupation
Austin Ins & Financial Serv AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857671

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional)

87.50

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 69 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Louis J. Bufano

Mailing Address 3425 193RD STREET

City State Zip Code
Lansing IL 60438-3862

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

Name of Employer Occupation
Lou Bufano & Associates Agency Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857687

Amount of Each Receipt this Period
17.00

B.

Full Name (Last, First, Middle Initial)
Mr. Roger W. Garrett

Mailing Address 23 Buckburst Circle

City State Zip Code
Bloomington IL 61704

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

Name of Employer Occupation
R. W. Garrett Agency Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857689

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Ms. Brenda D. Doty

Mailing Address 107 Topaz

City State Zip Code
Horseshoe Bend AR 72512

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

Name of Employer Occupation
Doty Group Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857697

Amount of Each Receipt this Period
51.00

SUBTOTAL of Receipts This Page (optional) ► **93.00**

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 70 / 234
	<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 Comm

A.

Full Name (Last, First, Middle Initial) Ms. Linda J. Melson		Date of Receipt MM / DD / YYYY 12 / 10 / 2009
Mailing Address 1810 W. Illinois		Transaction ID: 8857707
City Midland	State TX	Zip Code 79701
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.00	
Name of Employer Melson and Associates	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

B.

Full Name (Last, First, Middle Initial) Mr. Alan C. Kifer		Date of Receipt MM / DD / YYYY 12 / 10 / 2009
Mailing Address 21500 Park Row Rd #1115		Transaction ID: 8857733
City Katy	State TX	Zip Code 77449-2431
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 210.00	
Name of Employer American General Life & Accident Insur	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2520.00	

C.

Full Name (Last, First, Middle Initial) Mr. Russell D. Jenkins		Date of Receipt MM / DD / YYYY 12 / 10 / 2009
Mailing Address 1988 Burlingame Rd.		Transaction ID: 8857751
City Emporia	State KS	Zip Code 66801
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.40	
Name of Employer Northwestern Mutual Fin. Network	Occupation Financial Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 604.80	

SUBTOTAL of Receipts This Page (optional)	281.40
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 71 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Brenda A. Lastine
Mailing Address 130 N 25th St.
City State Zip Code
Fort Dodge IA 50501-4338
FEC ID number of contributing federal political committee. **C**
Name of Employer Kingsgate Health Insurance Occupation MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8857759
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Mr. Shannon J. Enders
Mailing Address 5677 Westwood Drive
City State Zip Code
Muskegon MI 49441
FEC ID number of contributing federal political committee. **C**
Name of Employer Lakeshore Employee Benefits Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 504.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8857779
Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph R. Giangola, Sr.
Mailing Address 1925 Pleasantview
City State Zip Code
Ashtabula OH 44004-9719
FEC ID number of contributing federal political committee. **C**
Name of Employer Giangola Insurance Agency Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8857781
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 82.00
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 72 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Richard A. Koob

Mailing Address 301 Frederick Street

City State Zip Code
Waukesha WI 53186-8116

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

Name of Employer Occupation
The Holter Financial Group Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857787

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. Mark A. Staat

Mailing Address 14315 Pine Creek Court, #202

City State Zip Code
Holland MI 49424-1265

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

Name of Employer Occupation
Northwestern Mutual Financial Network Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857789

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Carl F. Mehlhop

Mailing Address 89 Van Ripper Ln

City State Zip Code
Orinda CA 94563-1129

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

Name of Employer Occupation
Northwestern Mutual Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8857793

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **96.40**

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 73 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Alan J. Cyr

Mailing Address 1253 w Rudisill Blvd

City State Zip Code
Fort Wayne IN 46807-2144

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

Name of Employer
Cyr & Cyr Insurance Services

Occupation
PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857799

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Paul E. Budke

Mailing Address 20045 SW Aten Rd

City State Zip Code
Beaverton OR 97007-9784

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

Name of Employer
Paul E. Budke Insurance Services

Occupation
AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857811

Amount of Each Receipt this Period
17.00

C.

Full Name (Last, First, Middle Initial)
Ms. Sharon L. Hansen

Mailing Address P.O. Box 1249
1219 S Second Street

City State Zip Code
Mt Vernon WA 98273

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

Name of Employer
Heritage Financial Group, Inc

Occupation
Financial Professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857827

Amount of Each Receipt this Period
27.50

SUBTOTAL of Receipts This Page (optional) ► **69.50**

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 74 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. David B. Bianchi

Mailing Address 1125 Beldon Way

City State Zip Code
Reno NV 89503-3164

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857833

Amount of Each Receipt this Period
60.00

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

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 Occupation
Saybrus Partners Wealth Management Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857837

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Mr. Randall H. Jensen

Mailing Address 124 W 46th St., #201

City State Zip Code
Kearney NE 68847-8348

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

Name of Employer Occupation
The Principal Financial Group Sr. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857841

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **227.50**

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 75 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 13243 SE 51st PI

City State Zip Code
Bellevue WA 98006

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

Name of Employer Occupation
Fowler Financial Services, Inc. President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1290.00

Date of Receipt

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

Transaction ID: 8857847
 Amount of Each Receipt this Period
 107.50

B. Full Name (Last, First, Middle Initial)
Mr. Walter J. Scott

Mailing Address 1022 Washington Ave

City State Zip Code
Oshkosh WI 54901-5354

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

Name of Employer Occupation
W. F. Coe & Associates, LLC Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 604.80

Date of Receipt

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

Transaction ID: 8857851
 Amount of Each Receipt this Period
 50.40

C. Full Name (Last, First, Middle Initial)
Mr. William T. Whitmore, Jr.

Mailing Address 3495 Winding Trail Circle

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer Occupation
One America Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 767.50

Date of Receipt

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

Transaction ID: 8857855
 Amount of Each Receipt this Period
 65.00

SUBTOTAL of Receipts This Page (optional) ► 222.90

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 76 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gary H. Pendleton

Mailing Address 2607 Oberlin Rd
Ste 100

City Raleigh State NC Zip Code 27608-1319

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

Name of Employer
Pendleton Financial Con-
sulting, Inc.

Occupation
President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
549.96

Date of Receipt

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

Transaction ID: 8857865

Amount of Each Receipt this Period

45.83

B.

Full Name (Last, First, Middle Initial)

Mr. Irwin R. Wetnight, Jr.

Mailing Address 95 W. Prescott Ave.

City Clovis State CA Zip Code 93619-8743

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

Name of Employer
Principal Financial Group

Occupation
AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

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

Transaction ID: 8857875

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Ms. Teresa L. Seefeldt

Mailing Address 643 Gaelic Court

City Apopka State FL Zip Code 32712

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

Name of Employer
Rogers Benefit Group

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

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

Transaction ID: 8857877

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

91.83

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 77 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 18600 Longview Ct

City State Zip Code
Brookfield WI 53045

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mortensen-Winkelhake General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8857879

Amount of Each Receipt this Period 90.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert D. Buxbaum, CLU, ChFC

Mailing Address 4 Linwood Rd.

City State Zip Code
Wellesley MA 02181

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Bay Financial Associates LLC Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8857899

Amount of Each Receipt this Period 21.00

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

Mailing Address 28630 Glenbrook Dr

City State Zip Code
Southfield MI 48034-5543

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Michigan Financial Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 870.00

Date of Receipt M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8857905

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) 186.00

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 78 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Albert B. Brodbeck

Mailing Address 56 Dundee Road

City State Zip Code
Stamford CT 06903-3623

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

Name of Employer Occupation
Prudential Financial AGENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

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

Transaction ID: 8857909

Amount of Each Receipt this Period

17.50

B.

Full Name (Last, First, Middle Initial)

Mr. Dan E. Nicholas

Mailing Address 206 Pacheco Ave

City State Zip Code
Santa Cruz CA 95062-1231

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

Name of Employer Occupation
Nicholas Insurance & Financial Independent Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt

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

Transaction ID: 8857953

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Ms. April L. Howard

Mailing Address 3386 Williamsburg

City State Zip Code
Boise ID 83706-5320

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

Name of Employer Occupation
Howard Insurance Agency Agent/Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

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

Transaction ID: 8857975

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

98.50

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 79 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Harold A. Gillet

Mailing Address 8711 Mashie Lane

City State Zip Code
Missoula MT 59808-5412

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

Name of Employer Occupation
Security Life of Denver General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 259.20

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857987

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. Randall D. Kaufmann

Mailing Address 356 Equus Drive

City State Zip Code
Camp Hill PA 17011-8357

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

Name of Employer Occupation
Prudential Financial Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8857999

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Mr. David E. Smithkey

Mailing Address 9451 Heddy Drive

City State Zip Code
Flushing MI 48433-1051

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

Name of Employer Occupation
Security First Benefits Corp. President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858005

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 80 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 22928 San Joaquin Drive East

City State Zip Code
Canyon Lake CA 92587-7831

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

Name of Employer Occupation
Torimax Financial Group, Inc. President & CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2502.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858043

Amount of Each Receipt this Period
208.50

B. Full Name (Last, First, Middle Initial)
Mr. John C. Johns

Mailing Address 5141 Lilly Rd.

City State Zip Code
Hazlehurst MS 39083

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

Name of Employer Occupation
Southern Farm Bureau Life Insurance Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858074

Amount of Each Receipt this Period
52.50

C. Full Name (Last, First, Middle Initial)
Ms. Cecilia H. Carlton

Mailing Address P. O. Box 636

City State Zip Code
Hazlehurst MS 39083-0636

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

Name of Employer Occupation
Southern Farm Bureau Life Insurance AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 532.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858080

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 311.00

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 81 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Wayne F. Gledhill

Mailing Address 2746 E. Majestic Ridge Cir.

City State Zip Code
Salt Lake City UT 84121-4407

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

Name of Employer Occupation
Oxford Financial Group Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858094

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Juli Y. McNeely

Mailing Address S764 Hanson Road

City State Zip Code
Spencer WI 54479

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

Name of Employer Occupation
McNeely Financial Services Inc Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 639.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858142

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Mr. John A. Forbing

Mailing Address 23209 Charwood PI

City State Zip Code
Diamond Bar CA 91765-3016

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

Name of Employer Occupation
State Farm Insurance Companies Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858264

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **106.00**

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 82 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard L. Miller

Mailing Address 1214 Karr Ave.

City State Zip Code
Yakima WA 98902-5026

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

Name of Employer: Northwestern Mutual Financial Network
Occupation: Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 532.50

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858306
Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Norbert F. Mayer

Mailing Address 1301 N 23rd St

City State Zip Code
Bismarck ND 58501-3003

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

Name of Employer: Thrivent Financial for Lutherans
Occupation: Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858337
Amount of Each Receipt this Period: 18.00

C.

Full Name (Last, First, Middle Initial)
Mr. Glenn P. Deal, Jr.

Mailing Address 58 Golf Course Ln.

City State Zip Code
Taylorsville NC 28681-7847

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

Name of Employer: Thrivent Financial for Lutherans
Occupation: Financial Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 745.25

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858375
Amount of Each Receipt this Period: 74.25

SUBTOTAL of Receipts This Page (optional) ► **142.25**

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 83 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mrs. Sherry K. Flynn
Mailing Address #58 C R 5151
City Bloomfield State NM Zip Code 87413-9700
FEC ID number of contributing federal political committee. **C**
Name of Employer ING Occupation Reg. Rep.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.40
Date of Receipt 12 / 10 / 2009
Transaction ID: 8858413
Amount of Each Receipt this Period 25.20

B. Full Name (Last, First, Middle Initial)
Mr. Bud Clisby
Mailing Address 4353 Browning Lane
City Viera State FL Zip Code 32955-6701
FEC ID number of contributing federal political committee. **C**
Name of Employer Bud Clisby Insurance Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8858437
Amount of Each Receipt this Period 21.00

C. Full Name (Last, First, Middle Initial)
Mr. John Everett
Mailing Address 531 Daniel
City Santa Maria State CA Zip Code 93454
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Life Insurance Company Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 504.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8858471
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 88.20
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 84 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Hiller

Mailing Address W267 S7930 Stony Pt. Ct.

City State Zip Code
Mukwonago WI 53149-9687

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

Name of Employer Occupation
Central Financial Services General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.40

Date of Receipt

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

Transaction ID: 8858481

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Ms. Carolyn S. Miller

Mailing Address 2469 W. Rosebush Rd

City State Zip Code
Weidman MI 48893-9791

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

Name of Employer Occupation
General Agency Company AGENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.00

Date of Receipt

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

Transaction ID: 8858525

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Maridan C. Christensen

Mailing Address 8303 NW Eastside Dr.

City State Zip Code
Weatherby Lake MO 64152

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

Name of Employer Occupation
Humana Insurance Company Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

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

Transaction ID: 8858529

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) ▶

61.20

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 85 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Rust

Mailing Address 114 W. Arnold

City State Zip Code
Bozeman MT 59715-6129

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

Name of Employer State Farm Insurance Companies
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1380.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858551

Amount of Each Receipt this Period
90.00

B. Full Name (Last, First, Middle Initial)
Ms. Ruby A. Miller

Mailing Address 117 Clemson Dr.

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer State Farm Insurance Companies
Occupation Agent/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858565

Amount of Each Receipt this Period
13.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert A. Berg

Mailing Address 1405 Blackberry Lane

City State Zip Code
Stevens Point WI 54481-9140

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

Name of Employer Planning Concepts Inc.
Occupation Sales Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8858569

Amount of Each Receipt this Period
36.00

SUBTOTAL of Receipts This Page (optional) ► **139.00**

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 86 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Edward Sneed

Mailing Address 5005 Woodminster

City State Zip Code
Oakland CA 94601

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

Name of Employer State Farm Insurance Companies
Occupation Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt

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

Transaction ID: 8858575

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Bradley

Mailing Address 148 Grove Street

City State Zip Code
Westwood MA 02090

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

Name of Employer Bradley Insurance Agency, Inc
Occupation President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.92

Date of Receipt

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

Transaction ID: 8858577

Amount of Each Receipt this Period

41.66

C.

Full Name (Last, First, Middle Initial)

Mr. David M. Koll

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 Mutual of Omaha
Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1260.00

Date of Receipt

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

Transaction ID: 8858599

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

167.66

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 87 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James R. Christensen, Jr.

Mailing Address 440 Regency Pkwy Dr #210A

City State Zip Code
Omaha NE 68114

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

Name of Employer Occupation
INSOURCE, Inc. General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858601

Amount of Each Receipt this Period
105.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory A. Boyer

Mailing Address 1523 Summit Dr.

City State Zip Code
West Lafayette IN 47906-2227

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

Name of Employer Occupation
American United Life AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858613

Amount of Each Receipt this Period
17.50

C. Full Name (Last, First, Middle Initial)
Mr. Dale F. Mamele

Mailing Address 410 Steeple Crest North

City State Zip Code
Irmo SC 29063-8244

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

Name of Employer Occupation
Summer Insurance Agency, LLC PRINCIPAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858653

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 147.50

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 88 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. R. Jan Pinney

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 Pinney Insurance Center, Inc. Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858661
Amount of Each Receipt this Period: 208.00

B. Full Name (Last, First, Middle Initial)
Mr. Wayne Miles Eckman

Mailing Address 701 W 2350 N

City State Zip Code
Woods Cross UT 84087-1070

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

Name of Employer State Farm Insurance Companies Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858665
Amount of Each Receipt this Period: 21.00

C. Full Name (Last, First, Middle Initial)
Mr. Mitchell W. Ostrove

Mailing Address 4 New King Street

City State Zip Code
White Plains NY 10604-1202

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

Name of Employer The Ostrove Group Inc. Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858673
Amount of Each Receipt this Period: 42.00

SUBTOTAL of Receipts This Page (optional) ► 271.00

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 89 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jonathan David Haymes

Mailing Address 1230 s. hickory lane

City State Zip Code
Nixa MO 65714

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

Name of Employer Occupation
Haymes Insurance Agency Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.40

Date of Receipt

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

Transaction ID: 8858679

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Tod D. Lashway

Mailing Address 6176 E Greenway Ln

City State Zip Code
Scottsdale AZ 85254-2541

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

Name of Employer Occupation
Penn Mutual Life Insurance Company Director Field Learning & Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

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

Transaction ID: 8858699

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Mr. Steven R. Markham

Mailing Address 4 Alae St.

City State Zip Code
Hilo HI 96720

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

Name of Employer Occupation
Markham Insurance Services OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 585.00

Date of Receipt

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

Transaction ID: 8858711

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional) ▶

82.70

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 90 / 234

(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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Allen L. Dennis

Mailing Address 3145 Heatheridge Lane

City State Zip Code
Reno NV 89509-3021

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

Name of Employer
American National Insurance Company

Occupation
AGENT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: 8858749

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Gregory G Braden

Mailing Address 933 E 1938th Rd.

City State Zip Code
Eudora KS 66025-9101

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

Name of Employer

Occupation
Owner/Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

446.40

Date of Receipt

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

Transaction ID: 8858769

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Robert M. Burd

Mailing Address 22 Cedarwood Dr

City State Zip Code
Watseka IL 60970-9740

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

Name of Employer
Country Financial

Occupation
Agent

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: 8858777

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

67.20

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 91 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Michael D. Harris

Mailing Address 11695 US HWY 45N

City State Zip Code
Ozark IL 62972-1032

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

Name of Employer Country Financial Occupation Owner/Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858791

Amount of Each Receipt this Period
22.50

B. Full Name (Last, First, Middle Initial)
Mr. M. Steven Brotherton

Mailing Address 558 Brianton Lane

City State Zip Code
Lawrenceville GA 30045-9435

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

Name of Employer New England Financial - Atlanta Agency Occupation Advanced Underwriting Specialist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858797

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Lawrence P. Decker

Mailing Address 14480st, Rt 64

City State Zip Code
Metamora OH 43540

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

Name of Employer GORKOWSKI, DECKER & BROWN Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858813

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **72.50**

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 92 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

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

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 Midlands Financial Benefits Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8858815

Amount of Each Receipt this Period 42.50

B.

Full Name (Last, First, Middle Initial)
Mr. George M. Dudikoff

Mailing Address 12897 Quail Hollow Dr

City Fairfield State CA Zip Code 94534

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

Name of Employer Farmers Insurance Group Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8858869

Amount of Each Receipt this Period 21.00

C.

Full Name (Last, First, Middle Initial)
Ms. Jill M. Douglass

Mailing Address 2932 Sunstone St.

City Las Vegas State NV Zip Code 89128-7742

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

Name of Employer Country Financial Occupation District_Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8858873

Amount of Each Receipt this Period 27.00

SUBTOTAL of Receipts This Page (optional) ► **90.50**

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 93 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Edward D. Jenkins

Mailing Address 14 Pebble Cove

City State Zip Code
Petal MS 39465

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

Name of Employer Occupation
Woodmen of The World Field Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858891

Amount of Each Receipt this Period
22.50

B.

Full Name (Last, First, Middle Initial)
Mr. William D. Burke

Mailing Address 2216 Nelda Way

City State Zip Code
Alamo CA 94507

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

Name of Employer Occupation
Pacific Life Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858919

Amount of Each Receipt this Period
21.00

C.

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

Mailing Address PO Box 2205

City State Zip Code
Avila Beach CA 93424-2205

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

Name of Employer Occupation
Michael Ables Insurance Services AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 592.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8858951

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **86.00**

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 94 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Robelynn H. Abadie

Mailing Address 4933 Antioch Blvd

City State Zip Code
Baton Rouge LA 70817-2330

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

Name of Employer Occupation
Abadie Financial Services CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt

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

Transaction ID: 8858953

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)
Mr. Peter K. Howard

Mailing Address 326 Rosemary Lane

City State Zip Code
Danville VA 24541-4526

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

Name of Employer Occupation
Tower Square Securities Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 292.00

Date of Receipt

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

Transaction ID: 8858959

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)
Ms. Sandra E. Henderson

Mailing Address 207 E Moody Ave

City State Zip Code
Fresno CA 93720-1506

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

Name of Employer Occupation
Plan Financial Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 327.50

Date of Receipt

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

Transaction ID: 8858973

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

67.00

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 95 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey P. Case

Mailing Address 1311 33rd Avenue S.W.

City State Zip Code
Minot ND 58701-7266

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

Name of Employer Case Financial Services Inc Occupation General Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8858985
Amount of Each Receipt this Period: 27.00

B. Full Name (Last, First, Middle Initial)
Ms. Michele A. Kobielnik

Mailing Address 1809 Amos Circle

City State Zip Code
Pensacola FL 32526

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

Name of Employer Affiliated Insurance Occupation Sales Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859007
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Mr. David T. Koppa

Mailing Address 1105 Via Bolzano

City State Zip Code
Santa Barbara CA 93111-1053

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

Name of Employer Cornerstone Insurance Services Occupation Insurance Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859011
Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► 99.50

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 96 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Robert T. MacDonald

Mailing Address 1931 N 73rd St.

City State Zip Code
Wauwatosa WI 53213

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

Name of Employer Occupation
Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8859017

Amount of Each Receipt this Period
27.00

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel R. Gehl

Mailing Address 28927 42nd Avenue

City State Zip Code
Paw Paw MI 49079

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

Name of Employer Occupation
Ronald B. Wisner & Associates General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8859023

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Peter D. Holler

Mailing Address 112 Evergreen Pl

City State Zip Code
Bristol TN 37620

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

Name of Employer Occupation
SBS Services President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8859067

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **73.00**

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 97 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Leonard Martin

Mailing Address 98 Tennyson Rd

City State Zip Code
Warwick RI 02888-1818

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

Name of Employer Leonard Martin & Associates Inc Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
604.80

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859085

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. Elwyn D. Guernsey

Mailing Address 618 Lakewood Road

City State Zip Code
Pensacola FL 32507-2434

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

Name of Employer Guernsey & Associates Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859107

Amount of Each Receipt this Period
42.50

C. Full Name (Last, First, Middle Initial)
Ms. Martha Hall

Mailing Address PO Box 837

City State Zip Code
Wichita Falls TX 76307-0837

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

Name of Employer Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859117

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **112.90**

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 98 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Gregory Lynn Grimes
Mailing Address 2310 Live Oak Ln
City Columbia State MO Zip Code 65202-1789
FEC ID number of contributing federal political committee. **C**
Name of Employer APEX Financial, LLC Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859119
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Mr. Brian Dee Counterman
Mailing Address 7893 W. Quarto Ave.
City Littleton State CO Zip Code 80128
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Counterman Occupation Owner/Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859145
Amount of Each Receipt this Period 21.00

C. Full Name (Last, First, Middle Initial)
Ms. Amy K. Byrne
Mailing Address 900 N Shoreline Blvd
City Mountain View State CA Zip Code 94043-1933
FEC ID number of contributing federal political committee. **C**
Name of Employer Vita Insurance Associates, Inc. Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859165
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 76.00
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 99 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Howard S. Clark

Mailing Address 4519 Sleeping Indian Road

City State Zip Code
Fallbrook CA 92028

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

Name of Employer Occupation
Ohio National Fin. Svcs. Regional Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859169

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard J. Chandik

Mailing Address 1332 Shorebird Ln

City State Zip Code
Carlsbad CA 92011-4884

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

Name of Employer Occupation
Lincoln Financial Network Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859179

Amount of Each Receipt this Period
47.50

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas C. Besselman

Mailing Address 6421 Perkins Rd #2B

City State Zip Code
Baton Rouge LA 70808-4125

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

Name of Employer Occupation
The Besselman & Little Agency President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859183

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **122.50**

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 100 / 234
	(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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. James J. Dinsmore		Date of Receipt
	Mailing Address 104 Lehman Drive		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cogan Station	PA	17728-9228
	FEC ID number of contributing federal political committee. C		Transaction ID: 8859219
Name of Employer Liberty Mutual Insurance Co		Occupation Exec. Sales Rep.	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" value="252.00"/>	<input type="text" value="21.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Joseph J. Maltese		Date of Receipt
	Mailing Address 4176 Arikakee Court		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Jacksonville	FL	32223
	FEC ID number of contributing federal political committee. C		Transaction ID: 8859249
Name of Employer John Hancock Della Porta Agency		Occupation Investment Advisor Rep.	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" value="504.00"/>	<input type="text" value="42.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Tom L. Hamby		Date of Receipt
	Mailing Address 1115 E Elm		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	El Reno	OK	73036-3911
	FEC ID number of contributing federal political committee. C		Transaction ID: 8859261
Name of Employer New York Life		Occupation Insurance Agent	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" value="360.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="93.00"/>
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 101 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Steve L. Hampton

Mailing Address P.O. Box 319

City State Zip Code
Upton WY 82730-0319

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

Name of Employer
Hampton Insurance & Financial Services

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8859319

Amount of Each Receipt this Period
21.00

B.

Full Name (Last, First, Middle Initial)
Mr. Sergio J. Acuna

Mailing Address 1856 Bob Murphy Drive

City State Zip Code
El Paso TX 79936

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

Name of Employer
Lincoln Financial Network

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8859325

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Henry Donaghy

Mailing Address 400 North Church Street # 208

City State Zip Code
Charlotte NC 28203

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

Name of Employer
Mass Mutual

Occupation
Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.20

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8859361

Amount of Each Receipt this Period
23.10

SUBTOTAL of Receipts This Page (optional) ► **86.10**

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 102 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. F. Nicholas Kelley

Mailing Address 1323 S. 174 St.

City State Zip Code
Omaha NE 68130

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

Name of Employer
Kelley Financial Services, Inc

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859429

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Archie F. Lowe

Mailing Address 3580 Pierce Dr NE #100

City State Zip Code
Chamblee GA 30341

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

Name of Employer
Benefit Management Group

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859433

Amount of Each Receipt this Period
21.00

C.

Full Name (Last, First, Middle Initial)
Ms. Queenie M. Chee

Mailing Address 833 Waika Place

City State Zip Code
Honolulu HI 96825-1061

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

Name of Employer
The Principal Financial Group

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859435

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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 103 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Jeri L. Regan

Mailing Address 2616 No. 100th Avenue

City State Zip Code
Omaha NE 68134-5510

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

Name of Employer: MassMutual Financial Group Occupation: AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859441
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Delford G. Britton

Mailing Address 1736 Jefferson Street

City State Zip Code
Napa CA 94559-1703

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

Name of Employer: MassMutual Financial Group Occupation: AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859465
Amount of Each Receipt this Period: 21.00

C. Full Name (Last, First, Middle Initial)
Ms. Jill H. Clark

Mailing Address 201 39th Street

City State Zip Code
West Des Moines IA 50265-3931

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

Name of Employer: Compensation Designs Occupation: President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859503
Amount of Each Receipt this Period: 18.00

SUBTOTAL of Receipts This Page (optional) ► 64.00

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 104 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Michael Joseph Jungen

Mailing Address N81 W23285 Five Iron Way

City State Zip Code
Sussex WI 53089

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

Name of Employer Occupation
New York Life 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
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859553

Amount of Each Receipt this Period
18.00

B.

Full Name (Last, First, Middle Initial)
Mr. Roland G. Barrera

Mailing Address 2621 Camargo

City State Zip Code
Corpus Christi TX 78415

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

Name of Employer Occupation
Roland Barrera Insurance Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: 8859559

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Fred Kazmierski

Mailing Address 1116 Grand Ave Ste 204

City State Zip Code
Billings MT 59102-4282

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

Name of Employer Occupation
MMA Financial Services Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 324.00

Date of Receipt

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

Transaction ID: 8859563

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ▶

75.00

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 105 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

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

Mailing Address 42 Ritz Cove Drive

City Dana Point State CA Zip Code 92629-4228

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

Name of Employer FDP Wealth Management Occupation Agent/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859569

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Casey C. Knake

Mailing Address 2902 Mach I Dr.

City Norfolk State NE Zip Code 68701-3238

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

Name of Employer Heritage Financial Services, LLC Occupation Investment Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859571

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jerry E. Jensen

Mailing Address 190 So. 800 W.

City Blackfoot State ID Zip Code 83221-6132

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

Name of Employer Jensco, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 357.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859585

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **99.00**

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 106 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Timothy J. Brungardt
Mailing Address 314 N. 5th.
City Norfolk State NE Zip Code 68701-4093
FEC ID number of contributing federal political committee. **C**
Name of Employer Heritage Financial Services Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 504.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859593
Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Mr. William David Keltner
Mailing Address 181 Northwyke Dr
City Jackson State TN Zip Code 38305
FEC ID number of contributing federal political committee. **C**
Name of Employer Modern Woodmen of America Occupation Agency Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 237.50
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859599
Amount of Each Receipt this Period 12.50

C. Full Name (Last, First, Middle Initial)
Mr. Roger J. Lowery
Mailing Address 216 Country Club Ln
City Belleville State IL Zip Code 62223
FEC ID number of contributing federal political committee. **C**
Name of Employer The Lowery Group Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859609
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **304.50**
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 107 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Lawrence

Mailing Address 5553 Peters Drive

City State Zip Code
West Bend WI 53095-8301

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

Name of Employer Occupation
Modern Woodmen of America Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859617

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Mr. Dennis L. Helgeson

Mailing Address 2601 Bel Air Drive

City State Zip Code
Minot ND 58703-1749

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

Name of Employer Occupation
North American Company General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859621

Amount of Each Receipt this Period
25.20

C. Full Name (Last, First, Middle Initial)
Mr. Michael J. Milburn

Mailing Address 2332 Flagstaff Dr.

City State Zip Code
Longmont CO 80501

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

Name of Employer Occupation
Mutual of Omaha Companies AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859637

Amount of Each Receipt this Period
22.50

SUBTOTAL of Receipts This Page (optional) ► **107.70**

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 108 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Thomas W. Dzik

Mailing Address 530 Dodge Lane

City State Zip Code
St. Paul MN 55118-4802

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

Name of Employer Occupation
North Star Resource Group 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859645

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Albert T. Hurst, Jr.

Mailing Address 1901 S. Broadway St.

City State Zip Code
Little Rock AR 72206-1351

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

Name of Employer Occupation
Modern Woodmen of America Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 478.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859655

Amount of Each Receipt this Period
50.40

C. Full Name (Last, First, Middle Initial)
Mr. Steven Dwayne Gifford

Mailing Address P.O. Box 5027

City State Zip Code
Ashland KY 41105

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

Name of Employer Occupation
Mutual of Omaha Companies General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859665

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **100.60**

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 109 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Jon P. Kubler
Mailing Address 1620 N. 127th St
City Omaha State NE Zip Code 68154-3637
FEC ID number of contributing federal political committee. **C**
Name of Employer Asset Strategies Occupation Sales Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859675
Amount of Each Receipt this Period 21.00

B. Full Name (Last, First, Middle Initial)
Mr. Garry L. Phipps
Mailing Address N1390 Sauk Trail Rd.
City Oostburg State WI Zip Code 53070-1715
FEC ID number of contributing federal political committee. **C**
Name of Employer American Family Life Insurance Company Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859701
Amount of Each Receipt this Period 21.00

C. Full Name (Last, First, Middle Initial)
Mr. Harlynn N. Bjerke
Mailing Address P. O. Box 144
City Adams State ND Zip Code 58210-0144
FEC ID number of contributing federal political committee. **C**
Name of Employer Mutual of Omaha Companies Occupation AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 534.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8859715
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 72.00
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 110 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jaford D. Burgad

Mailing Address 3842 N. 10th St.

City State Zip Code
Fargo ND 58102-1044

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

Name of Employer Occupation
Mutual of Omaha Companies Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859717

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. Curtis L. Matlin

Mailing Address 707 Skokie Blvd. #700

City State Zip Code
Northbrook IL 60062

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

Name of Employer Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859731

Amount of Each Receipt this Period
21.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert A. Styrkowicz

Mailing Address 361 Pines Blvd.

City State Zip Code
Lake Villa IL 60046-6600

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

Name of Employer Occupation
Allstate Insurance Exclusive Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 820.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859737

Amount of Each Receipt this Period
72.50

SUBTOTAL of Receipts This Page (optional) ► **123.50**

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 111 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Michael V. May	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address PO Box 910	Transaction ID: 8859747
	City State Zip Code Port Richey FL 34673-0910	Amount of Each Receipt this Period 28.50
	FEC ID number of contributing federal political committee. C	
Name of Employer May & Associates Agency, Inc.	Occupation Career Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.00	

B.	Full Name (Last, First, Middle Initial) Mr. John F. Ridoux	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 911 Thorpe Drive	Transaction ID: 8859759
	City State Zip Code Louisville KY 40243-1959	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Life Insurance Company	Occupation Agency Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.40	

C.	Full Name (Last, First, Middle Initial) Mr. Michael A. Riffenburg	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 5111 Borman Drive	Transaction ID: 8859779
	City State Zip Code Spartanburg SC 29301-3411	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Riffenburg Insurance Services, LLC	Occupation Agency Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	74.70
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 112 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Jaime Resendez

Mailing Address 1389 W. US Hwy. 77, Suite A

City State Zip Code
San Benito TX 78586

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

Name of Employer Allstate Life Insurance Company
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

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

Transaction ID: 8859793

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. James E. Mitchell

Mailing Address 3990 Jones Ln

City State Zip Code
Bellingham WA 98225-8544

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

Name of Employer Mitchell Financial Services
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1030.00

Date of Receipt

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

Transaction ID: 8859797

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. Ian C. Wilkinson

Mailing Address P.O. Box 7096

City State Zip Code
Macon GA 31209-7096

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

Name of Employer Wilkinson & Associates
Occupation Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

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

Transaction ID: 8859803

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **138.00**

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 113 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Michael G. Murphy

Mailing Address 2041 S 88 St

City State Zip Code
Omaha NE 68124-2111

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

Name of Employer
Grace/Mayer Insurance Agency Inc

Occupation
Registered Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859805

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lines Robert Ferguson, Jr.

Mailing Address 104 Hillview Drive

City State Zip Code
Charleston WV 25314

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

Name of Employer
New York Life

Occupation
AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859825

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City State Zip Code
West Monroe LA 71291

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

Name of Employer
MetLife Financial Services

Occupation
MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859827

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **117.00**

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 114 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Bernard M. Baudin

Mailing Address 632 Hesper Ave.

City State Zip Code
Metairie LA 70005-2659

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

Name of Employer Occupation
New York Life Assistant Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859829

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen J. Quiner, CLU, ChFC

Mailing Address 6832 Morningside Circle

City State Zip Code
Johnston IA 50131

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

Name of Employer Occupation
Coleman/Quiner, Ltd.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859839

Amount of Each Receipt this Period
18.00

C. Full Name (Last, First, Middle Initial)
Mr. John E. Raley

Mailing Address 15 Wildberry Ln NE

City State Zip Code
Iowa City IA 52240-9172

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

Name of Employer Occupation
American Family Life Insurance Company 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
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859845

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► **61.00**

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 115 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory J. Corrente

Mailing Address 3901 Clifford Drive

City State Zip Code
Metairie LA 70002

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

Name of Employer: Corrente & Associates
Occupation: Agent/Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859871
Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
Mr. L. Nelson Wingert

Mailing Address 418 Gettysburg Pike

City State Zip Code
Mechanicsburg PA 17055-5170

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

Name of Employer: Anchor Financial Group
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859911
Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ames D. Stetzler

Mailing Address 10804 W. 123rd Terrace

City State Zip Code
Overland Park KS 66213-2106

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

Name of Employer: The Resource Group, L.C.
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8859949
Amount of Each Receipt this Period: 18.00

SUBTOTAL of Receipts This Page (optional) ► 68.00

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 116 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. A. Duer Pierce, Jr.

Mailing Address 5818 Kennett Pike

City State Zip Code
Wilmington DE 19807-1116

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

Name of Employer Financial House Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859953

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary M. Owens

Mailing Address PO Box 835

City State Zip Code
Sultan WA 98294

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

Name of Employer Gary M Owens Insurance Agency Inc Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859955

Amount of Each Receipt this Period
42.50

C. Full Name (Last, First, Middle Initial)
Mr. William E. Riley

Mailing Address 715 N. Washington Blvd., Suite D

City State Zip Code
Sarasota FL 34236

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

Name of Employer W. E. Riley and Associates 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8859977

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **92.50**

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 117 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Terry A. Boulter	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 9037 N Silver Lake Drive	Transaction ID: 8860001
	City State Zip Code Cedar Hills UT 84062-8788	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cambridge Financial Center Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.50	

B.	Full Name (Last, First, Middle Initial) Mr. John W. Wheeler, Jr.	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 1075 Aster Ln.	Transaction ID: 8860009
	City State Zip Code West Chicago IL 60185-1750	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 529.00	

C.	Full Name (Last, First, Middle Initial) Mr. Terry L. Poynor	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 1220 N Prince St	Transaction ID: 8860015
	City State Zip Code Clovis NM 88101	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Farmers Insurance Group Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.40	

SUBTOTAL of Receipts This Page (optional)	▶	92.20
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 118 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Benjamin Bunn Woodard, Jr.
Mailing Address 109 Bristol Court
City Rocky Mount State NC Zip Code 27803-1203
FEC ID number of contributing federal political committee. **C**
Name of Employer AXA Advisors Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 233.75
Date of Receipt 12 / 10 / 2009
Transaction ID: 8860031
Amount of Each Receipt this Period 13.75

B. Full Name (Last, First, Middle Initial)
Mr. Harry E. Sechman
Mailing Address 13 Beechwood Dr
City Rutland State MA Zip Code 01543-1751
FEC ID number of contributing federal political committee. **C**
Name of Employer H.E. Sechman Retirement Planning Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 510.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8860067
Amount of Each Receipt this Period 42.50

C. Full Name (Last, First, Middle Initial)
Ms. Johanna Tighe
Mailing Address 1408 Kentucky SE
City Albuquerque State NM Zip Code 87108
FEC ID number of contributing federal political committee. **C**
Name of Employer Farmers Ins Group Occupation Agency Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt 12 / 10 / 2009
Transaction ID: 8860075
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 86.25
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 119 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Roger L. Owens	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 104 Landing Lane	Transaction ID: 8860079
	City State Zip Code Elkton MD 21921-5204	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rymark Financial Services Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.	Full Name (Last, First, Middle Initial) Mr. Walter M. Schieffer, Jr.	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 17501 John Wayne	Transaction ID: 8860085
	City State Zip Code Perry OK 73077-9513	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Schieffer & Schieffer, In-c. President/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.40	

C.	Full Name (Last, First, Middle Initial) Mr. Jon R. Robb	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 214 Atlantic Dr.	Transaction ID: 8860089
	City State Zip Code Vernon Hills IL 60061-2029	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Farmers Insurance Group District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	108.70
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 120 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Bruce A. Murphy

Mailing Address 11840 Kearney Circle

City State Zip Code
Thornton CO 80233-5217

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

Name of Employer Occupation
Farmers Insurance Group AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 367.50

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8860091

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Carolyn R. Watson

Mailing Address 2032 Hollis

City State Zip Code
Abilene TX 79605-5726

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

Name of Employer Occupation
Ohio National Financial Insurance Agent
Services

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 595.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8860095

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. John Henry Ogden

Mailing Address 4109 Mohawk Cir

City State Zip Code
Springdale AR 72764-7547

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

Name of Employer Occupation
Farmers Insurance Group AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8860117

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **97.00**

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 121 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Robert J. Morales

Mailing Address 1125 Wyoming Avenue

City State Zip Code
Reno NV 89503-3342

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

Name of Employer Occupation
MC2 Wealth Solutions General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860121

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Wells

Mailing Address 18830 Los Hermanos Ranch Rd

City State Zip Code
Valley Center CA 92082-6808

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

Name of Employer Occupation
Daniel Wells Insurance & Financial Ser Owner/Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 802.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860131

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth A. Sherlin, III

Mailing Address 8 First Street

City State Zip Code
Ashville NC 28803-1414

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

Name of Employer Occupation
Keystone Financial & Benefit Resources Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860147

Amount of Each Receipt this Period
13.75

SUBTOTAL of Receipts This Page (optional) ► **123.75**

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 122 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

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

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: Financial & Insurance Services
Occupation: PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1260.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860151
Amount of Each Receipt this Period: 105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael P. Saunders

Mailing Address 4560 Ortega Blvd

City State Zip Code
Jacksonville FL 32210-6043

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

Name of Employer: Saunders & Co.
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860195
Amount of Each Receipt this Period: 21.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert D. Markwalter, II

Mailing Address 236 Clover Ct

City State Zip Code
Jacksonville FL 32259-4407

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

Name of Employer: North Florida Financial
Occupation: Career Development Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860227
Amount of Each Receipt this Period: 21.00

SUBTOTAL of Receipts This Page (optional) ► **147.00**

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 123 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Carl W. Middleton, III

Mailing Address 8500 Gordon Dr NE

City State Zip Code
Bainbridge Island WA 98110-3003

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

Name of Employer Occupation
Northwestern Mutual General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860243

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. James R. Goodrich

Mailing Address 1860 Beech

City State Zip Code
Mt. Pleasant MI 48858-1280

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

Name of Employer Occupation
Northwestern Mutual Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860259

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Mr. Samuel H. Hazleton, IV

Mailing Address 4220 Lakeshore Drive

City State Zip Code
Diamond Point NY 12824

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860281

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **123.00**

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 124 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Sharon S. Walls

Mailing Address 1831 Frontier Rd

City Bennington State KS Zip Code 67422-9063

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

Name of Employer: Kansas Financial Services Occupation: General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt: 12 / 10 / 2009

Transaction ID: 8860293

Amount of Each Receipt this Period: 21.00

B.

Full Name (Last, First, Middle Initial)
Mr. James R. Brown

Mailing Address 1500 Adam Dr

City Normal State IL Zip Code 61761-2144

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

Name of Employer: Northwestern Mutual Occupation: Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 10 / 2009

Transaction ID: 8860301

Amount of Each Receipt this Period: 21.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lance P. Franczyk

Mailing Address 3009 Alyssum Ct.

City Edmond State OK Zip Code 73034

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

Name of Employer: Oklahoma City Group Occupation: Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 12 / 10 / 2009

Transaction ID: 8860343

Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ► 102.00

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 125 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

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

Mailing Address 7023 W. Willamette Ave

City State Zip Code
Kennewick WA 99336-1280

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

Name of Employer Occupation
Kansas City Life Insurance Sales Manager
Company

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2496.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860345

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City State Zip Code
Orem UT 84097

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

Name of Employer Occupation
S. B. HEINZ & ASSOCIATES, Financial Rep
INC.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860349

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kevin K. Burckhard

Mailing Address 413-25th Ave NW

City State Zip Code
Minot ND 58703-0726

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

Name of Employer Occupation
Northwestern Mutual AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 324.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860355

Amount of Each Receipt this Period
27.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. O. Taylor Davis	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 104 Hanover Square	Transaction ID: 8860357
	City State Zip Code Lafayette LA 70508	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Louisiana Group Financial Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

B.	Full Name (Last, First, Middle Initial) Ms. Shelley M. Rowe	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 5908 E. Conservation Dr.	Transaction ID: 8860381
	City State Zip Code Longmont CO 80504	Amount of Each Receipt this Period 37.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Generations Financial Resources President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Mr. Joey Ussery	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 3539 River Road	Transaction ID: 8860393
	City State Zip Code Sealy TX 77474-9826	Amount of Each Receipt this Period 32.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation John Hancock Life Insurance Co. Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.50	

SUBTOTAL of Receipts This Page (optional)	▶	112.50
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 127 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. John D. Traynham

Mailing Address 210 Timber Lane

City Anderson State SC Zip Code 29621-1126

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

Name of Employer: Securian Financial Services, Inc. Occupation: Registered Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860509
Amount of Each Receipt this Period: 22.50

B. Full Name (Last, First, Middle Initial)
Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City Sioux Falls State SD Zip Code 57103-7248

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

Name of Employer: Modern Woodmen of America Occupation: Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860511
Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven P. Saladino

Mailing Address 116 E. 144th Ave

City Tampa State FL Zip Code 33613-2103

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

Name of Employer: Levin Financial Group Occupation: Insurance Brokerage Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860517
Amount of Each Receipt this Period: 21.00

SUBTOTAL of Receipts This Page (optional) ► 118.50

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 128 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mrs. Shelita Stuart

Mailing Address 8034 Brighton Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Occupation
Walden Financial Network President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860519

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Benson B. Terrell, Jr.

Mailing Address 9261 Lanier Rd

City State Zip Code
Lake Charles LA 70607-0352

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

Name of Employer Occupation
The Firm of Louisiana 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860553

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Marlin D. Wells

Mailing Address 2201 N. Washington

City State Zip Code
Roswell NM 88201-3377

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

Name of Employer Occupation
AXA Advisors, LLC Financial Professional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8860575

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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 129 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Dennis P. Sunderman

Mailing Address 2325 Jeans Ct

City State Zip Code
Signal Hill CA 90755-4047

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

Name of Employer: Eldercare Insurance Services
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
528.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860591
Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Gregory B. Schaeffer

Mailing Address 3627 - 22nd St.

City State Zip Code
Kenosha WI 53144-1443

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

Name of Employer: The Schaeffer Group, LLC
Occupation: AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860615
Amount of Each Receipt this Period: 27.00

C.

Full Name (Last, First, Middle Initial)
Mr. William L. Rudd

Mailing Address 3150 Mollifield Lane

City State Zip Code
Charlottesville VA 22911

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

Name of Employer: Nationwide Insurance
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860617
Amount of Each Receipt this Period: 21.00

SUBTOTAL of Receipts This Page (optional) ► **98.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. John N. Peacock

Mailing Address 18 Aubin St.

City State Zip Code
Seekonk MA 02771

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

Name of Employer Peacock Financial Group, LLC
Occupation Certified Financial Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.60

Date of Receipt

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

Transaction ID: 8860649

Amount of Each Receipt this Period
25.20

B. Full Name (Last, First, Middle Initial)
Mr. Mark Phelan Sudderberg

Mailing Address 1751 Clinton St.

City State Zip Code
Rockford IL 61103

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

Name of Employer Coyle Varland Insurance Agency, Inc.
Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

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

Transaction ID: 8860667

Amount of Each Receipt this Period
21.00

C. Full Name (Last, First, Middle Initial)
Mr. John P. Steele

Mailing Address 122 West Main

City State Zip Code
Manhattan MT 59741

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

Name of Employer Montana Employee Benefit Co.
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

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

Transaction ID: 8860669

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **76.20**

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 131 / 234
(check only one)

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<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 Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Donald A. Frost

Mailing Address 612 N Pageant Dr #A

City State Zip Code
Orange CA 92869-2572

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

Name of Employer Don Frost Insurance Agency, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860683

Amount of Each Receipt this Period
21.00

B.

Full Name (Last, First, Middle Initial)
Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City State Zip Code
Oil City LA 71061

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

Name of Employer Burke & Burke Insurance Mrktg. Inc. Occupation Agency Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1285.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860709

Amount of Each Receipt this Period
105.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Irene Parker

Mailing Address 131 Oakwood Ave

City State Zip Code
Edison NJ 08837-2308

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

Name of Employer Parker Ins. Svcs. Occupation Agent/Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860717

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► **144.00**

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 132 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John P. Mosley

Mailing Address 24 Pitt Street

City State Zip Code
Portland ME 04103-4856

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

Name of Employer Occupation
New York Life Financial Adviser

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 393.00

Date of Receipt

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

Transaction ID: 8860731

Amount of Each Receipt this Period

34.80

B.

Full Name (Last, First, Middle Initial)

Ms. Linda S. Harris

Mailing Address PO Box 261669

City State Zip Code
San Diego CA 92196-1669

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

Name of Employer Occupation
Harris Ins & Financial Services Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

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

Transaction ID: 8860759

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Sukolsky

Mailing Address 325 5th Ave # 101

City State Zip Code
Indialantic FL 32903-4273

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

Name of Employer Occupation
Northwestern Mutual Financial Network Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt

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

Transaction ID: 8860785

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional) ►

78.30

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 133 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. A. Christopher Engle
 Mailing Address 4485 Orchard Creek Ct S E
 City State Zip Code
 Kentwood MI 49546
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 9
Transaction ID: 8860801
 Amount of Each Receipt this Period
 30.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Argus Financial Consultants
 Occupation Certified Financial Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 337.50

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey D. Kowal
 Mailing Address N55W34867 W Lake Dr
 City State Zip Code
 Oconomowoc WI 53066
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 9
Transaction ID: 8860813
 Amount of Each Receipt this Period
 25.20
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kowal Investment Group, LLC
 Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 302.40

C. Full Name (Last, First, Middle Initial)
Mr. Peter D. Sullivan
 Mailing Address 824 Holter St
 City State Zip Code
 Helena MT 59601-6161
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 9
Transaction ID: 8860827
 Amount of Each Receipt this Period
 25.20
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sullivan Financial Group
 Occupation Registered Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 302.40

SUBTOTAL of Receipts This Page (optional) ► **80.40**
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 134 / 234
(check only one)

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

A. Full Name (Last, First, Middle Initial)
Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City Hendersonville State TN Zip Code 37075

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860843
 Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial)
Ms. Martha N. Olmstead

Mailing Address 1800 Chestnut St.

City Berkeley State CA Zip Code 94702

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

Name of Employer New York Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860851
 Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Mr. Clifford B. Sutter

Mailing Address 114 Holly Dr.

City Metairie State LA Zip Code 70005

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.50

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860867
 Amount of Each Receipt this Period: 42.00

SUBTOTAL of Receipts This Page (optional) ► **109.00**

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 135 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard B. Jacobs

Mailing Address 5396 Painted Sunrise Dr.

City State Zip Code
Las Vegas NV 89149-6443

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

Name of Employer
Principal Financial Group

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.80

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860871

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert W. Tull

Mailing Address 7815 Eagle Rock, N.E.

City State Zip Code
Albuquerque NM 87122

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

Name of Employer

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860917

Amount of Each Receipt this Period
25.50

C.

Full Name (Last, First, Middle Initial)
Mr. Jerry Lynn Stephens

Mailing Address 130 Tarheel Rd

City State Zip Code
Lumberton NC 28358

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

Name of Employer
United Professional Services

Occupation
Managing General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.20

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860923

Amount of Each Receipt this Period
23.10

SUBTOTAL of Receipts This Page (optional) ► **78.60**

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 136 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Stephen D. Noblin

Mailing Address 128 dogwood Lane

City State Zip Code
Cowpens SC 29330

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

Name of Employer Occupation
ING Reliastar General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860943

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. Terry K. Headley

Mailing Address 20704 Meadow Ridge Dr

City State Zip Code
Springfield NE 68059-7086

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

Name of Employer Occupation
Headley Financial Group Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860969

Amount of Each Receipt this Period
208.00

C. Full Name (Last, First, Middle Initial)
Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City State Zip Code
Sarasota FL 34241-9449

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

Name of Employer Occupation
Rogers Benefit Group Regional Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8860989

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► **334.00**

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 137 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Alan F. Simonis, Jr.

Mailing Address P. O. Box 1858

City State Zip Code
Huntsville AL 35807-0858

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

Name of Employer Protective Life Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860991
Amount of Each Receipt this Period: 21.00

B. Full Name (Last, First, Middle Initial)
Mr. James T. Bardin

Mailing Address 4226 Fairway Circle

City State Zip Code
Tampa FL 33624-4640

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

Name of Employer The Principal Financial Group Occupation Business Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8860995
Amount of Each Receipt this Period: 22.50

C. Full Name (Last, First, Middle Initial)
Ms. Therese M. Fairbanks

Mailing Address P. O. Box 7036

City State Zip Code
Billings MT 59103-7036

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

Name of Employer Payne Financial Group Occupation Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.50

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861005
Amount of Each Receipt this Period: 52.50

SUBTOTAL of Receipts This Page (optional) ► 96.00

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 138 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Robert E. Ross

Mailing Address 3918 S. Lisbon Way

City State Zip Code
Aurora CO 80013-6032

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

Name of Employer Occupation
Ross South Metro Agency, Inc. President & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 504.00

Date of Receipt

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

Transaction ID: 8861015

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Mr. James A. Shalek

Mailing Address 1706 Candleberry Lane

City State Zip Code
Yorkville IL 60560-5810

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

Name of Employer Occupation
Principal Financial Group Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt

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

Transaction ID: 8861021

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lester E. Westgard

Mailing Address 2714 26th Ave SW

City State Zip Code
Fargo ND 58103-5006

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

Name of Employer Occupation
The Principal Financial Group Special Marketing Developer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt

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

Transaction ID: 8861025

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

177.00

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 139 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Brian E. O'Brien		Date of Receipt
	Mailing Address 1651 Wolf Run Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Richfield	WI	53076-9686
	FEC ID number of contributing federal political committee.		Transaction ID: 8861039
		Amount of Each Receipt this Period	<input type="text"/>
			60.00
Name of Employer The Principal Financial Group		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
			720.00

B.	Full Name (Last, First, Middle Initial) Mr. J. William Mills		Date of Receipt
	Mailing Address 230 Montford Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Asheville	NC	28801-1660
	FEC ID number of contributing federal political committee.		Transaction ID: 8861053
		Amount of Each Receipt this Period	<input type="text"/>
			13.75
Name of Employer Mills Insurance Agency		Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
			220.00

C.	Full Name (Last, First, Middle Initial) Mr. Richard D. Kimmel		Date of Receipt
	Mailing Address 6525 Bellaire Drive S		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Ft Worth	TX	76132-1138
	FEC ID number of contributing federal political committee.		Transaction ID: 8861061
		Amount of Each Receipt this Period	<input type="text"/>
			50.00
Name of Employer Principal Financial Group		Occupation Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
			600.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>
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 140 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Larry R. Lee

Mailing Address 25106 Cineria

City State Zip Code
Lake Forest CA 92630-3307

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

Name of Employer: Financial Diligence Partners
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861065
Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark A. Kolterman

Mailing Address 2577 Waverly Road

City State Zip Code
Seward NE 68434-8030

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

Name of Employer: Kolterman Agency, Inc.
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861073
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Ms. Cheryl R. Parker

Mailing Address 4120 Rainbow Drive

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer: Atlantic Charter Insurance Group
Occupation: AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861111
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► **92.00**

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 141 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Mark P. Forgione

Mailing Address 10760 S.W. 154 Street

City State Zip Code
Miami FL 33157

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

Name of Employer Prudential Financial Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861113

Amount of Each Receipt this Period
22.50

B.

Full Name (Last, First, Middle Initial)
Mr. Jason B. Talley

Mailing Address 433 State Hwy 97 West

City State Zip Code
Floresville TX 78114

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

Name of Employer Talley Benefits Insurance Group, LLC Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861119

Amount of Each Receipt this Period
31.00

C.

Full Name (Last, First, Middle Initial)
Mr. K. Mark Spears

Mailing Address 3215 CYNTHIA DR.

City State Zip Code
LIMA OH 45801-2104

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

Name of Employer Prudential Financial Occupation Premier Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861125

Amount of Each Receipt this Period
17.50

SUBTOTAL of Receipts This Page (optional) ► **71.00**

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 142 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mrs. Evelyn Butler

Mailing Address 10 Lincoln Ave.

City State Zip Code
Vernon NJ 07462

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

Name of Employer Occupation
Certified Financial Services, LLC Field Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861169

Amount of Each Receipt this Period
7.20

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

Mailing Address 1802 First Ave

City State Zip Code
Scottsbluff NE 69361-2403

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

Name of Employer Occupation
Jolliffe Capital, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861173

Amount of Each Receipt this Period
42.50

C. Full Name (Last, First, Middle Initial)
Mr. Kim L. Christenson

Mailing Address 180 SW Gibson Lane

City State Zip Code
Issaquah WA 98027-4123

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

Name of Employer Occupation
Pacific Life Insurance Company Field Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861183

Amount of Each Receipt this Period
22.50

SUBTOTAL of Receipts This Page (optional) ► **72.20**

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 143 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Gregory P. Daigle

Mailing Address 500 Dover Blvd #215

City State Zip Code
Lafayette LA 70503

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

Name of Employer Occupation
The Pinnacle Group Financial Advisor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8861193

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. Glen R. Greathouse

Mailing Address 1452 E Lincoln Rd

City State Zip Code
Lake Charles LA 70605-0767

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

Name of Employer Occupation
Farm Bureau Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8861195

Amount of Each Receipt this Period
22.50

C. Full Name (Last, First, Middle Initial)
Mr. Donald B. Brown

Mailing Address 209 St. Clair

City State Zip Code
Natchitoches LA 71457-5133

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

Name of Employer Occupation
Southern Farm Bureau Life Insurance Agency Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8861217

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► 64.50

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 144 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Bobby L. Queener
Mailing Address 718 River Rock Blvd.
City Murfreesboro State TN Zip Code 37128
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861237
Amount of Each Receipt this Period: 22.50

Name of Employer: Shelter Life Insurance Co Occupation: Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 320.00

B. Full Name (Last, First, Middle Initial)
Mr. Preston R. Speece
Mailing Address 14620 Fowler Ave
City Omaha State NE Zip Code 68116
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861255
Amount of Each Receipt this Period: 30.00

Name of Employer: Heritage Financial Services Occupation: Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 360.00

C. Full Name (Last, First, Middle Initial)
Mr. Gwynn M. Blair
Mailing Address 715 Fernwood Drive
City Brooksville State FL Zip Code 34601-3613
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 12 / 10 / 2009
Transaction ID: 8861259
Amount of Each Receipt this Period: 17.50

Name of Employer: Florida Farm Bureau Life Ins. Occupation: Agency Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 210.00

SUBTOTAL of Receipts This Page (optional) ► 70.00
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 145 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Michael W. Struebing	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 16112 Parker Street	Transaction ID: 8861265
	City State Zip Code Omaha NE 68118-2429	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Heritage Financial Services, LLC Occupation: Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Mr. Vernon McFalls	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 100 Valley Meadow Lane	Transaction ID: 8861269
	City State Zip Code Searcy AR 72143	Amount of Each Receipt this Period 19.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Southern Farm Bureau Life Insurance Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.40	

C.	Full Name (Last, First, Middle Initial) Mr. Thomas K. Kilton	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 1933 E River Pkwy	Transaction ID: 8861285
	City State Zip Code Minneapolis MN 55408	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: State Farm Insurance Companies Occupation: AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 452.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.20
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 146 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. David R. Tuzson

Mailing Address 427 W 33rd #2

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer Occupation
Ohio National Life General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861293

Amount of Each Receipt this Period
21.00

B.

Full Name (Last, First, Middle Initial)
Mr. William A. Hume

Mailing Address 1075 Woodfield Lane

City State Zip Code
Libertyville IL 60048

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

Name of Employer Occupation
State Farm Insurance Companies Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 547.50

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861311

Amount of Each Receipt this Period
47.50

C.

Full Name (Last, First, Middle Initial)
Mr. James P. Shaheen

Mailing Address 3939 Linden Ave

City State Zip Code
Long Beach FL 90807-2714

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

Name of Employer Occupation
State Farm Insurance Companies MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861337

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **89.50**

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 147 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. C. Wayne Perkins

Mailing Address 171A County Road 198

City State Zip Code
Oxford MS 38655

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

Name of Employer Occupation
Southern Farm Bureau Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861343

Amount of Each Receipt this Period
37.50

B.

Full Name (Last, First, Middle Initial)
Mr. Craig K. Duncan

Mailing Address 3428 Aspen Trail

City State Zip Code
Clearwater FL 33761-1101

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

Name of Employer Occupation
State Farm Ins. Co. AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861383

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Donald Allen Chang

Mailing Address 12465 Overbrook Court

City State Zip Code
Reno NV 89511-7722

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

Name of Employer Occupation
State Farm Insurance Companies AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861389

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **92.70**

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 148 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Earl A. Thompson	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 21014 Pricewood Manor Ct.	Transaction ID: 8861407
	City State Zip Code Cypress TX 77433	Amount of Each Receipt this Period 52.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer State Farm Insurance Companies Occupation AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 624.00	

B.	Full Name (Last, First, Middle Initial) Mr. Darrel V. Hovde	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 1001 19th Ave SW	Transaction ID: 8861413
	City State Zip Code Minot ND 58701-6139	Amount of Each Receipt this Period 30.60
	FEC ID number of contributing federal political committee. C	
	Name of Employer State Farm Ins. Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 367.20	

C.	Full Name (Last, First, Middle Initial) Mr. Michael C. Herring	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 9550 N 150th Ct	Transaction ID: 8861425
	City State Zip Code Waverly NE 68462-1569	Amount of Each Receipt this Period 22.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer State Farm Insurance Companies Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	105.10
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 149 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Todd A. Otto

Mailing Address 945 Senior Ave

City Dickinson State ND Zip Code 58601-3757

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

Name of Employer State Farm Insurance Companies Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt 12 / 10 / 2009

Transaction ID: 8861433

Amount of Each Receipt this Period 25.20

B.

Full Name (Last, First, Middle Initial)
Mr. Edward F. Randolph

Mailing Address 1515 Mill Bay Road Suite A

City Kodiak State AK Zip Code 99615-6233

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

Name of Employer Edward F Randolph Ins. Agency Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8861435

Amount of Each Receipt this Period 42.00

C.

Full Name (Last, First, Middle Initial)
Ms. Martha J. Stark

Mailing Address 300 St. Andrews Circle

City Oxford State MS Zip Code 38655

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

Name of Employer State Farm Insurance Company Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8861473

Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional) ► **88.20**

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 150 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Cylinda A. Clark

Mailing Address 4002 San Mateo

City State Zip Code
Plano TX 75093-6618

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

Name of Employer Occupation
Sales Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
634.00

Date of Receipt

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

Transaction ID: 8861475

Amount of Each Receipt this Period

44.50

B.

Full Name (Last, First, Middle Initial)
Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City State Zip Code
Puunene HI 96784

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

Name of Employer Occupation
Transamerica Life Insurance Companies Branch Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
450.00

Date of Receipt

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

Transaction ID: 8861487

Amount of Each Receipt this Period

37.50

C.

Full Name (Last, First, Middle Initial)
Mr. J. Blayne Bird

Mailing Address 315 Willow Dr

City State Zip Code
Blackfoot ID 83221-3907

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

Name of Employer Occupation
Archibald Ins. Center Financial Services Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
360.00

Date of Receipt

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

Transaction ID: 8861493

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

112.00

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 151 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. James W. Brown

Mailing Address 6334 Deveron Drive

City State Zip Code
Charlotte NC 28211-4612

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

Name of Employer State Farm Occupation Owner/Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861515

Amount of Each Receipt this Period
23.10

B. Full Name (Last, First, Middle Initial)
Mr. Daniel C. Bell

Mailing Address P. O. Box 1747

City State Zip Code
Cleveland MS 38732-1747

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

Name of Employer State Farm Insurance Companies Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861527

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Randall S. Prout

Mailing Address 651 W 9th St

City State Zip Code
Claremont CA 91711-3742

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

Name of Employer State Farm Insurance Companies Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861537

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► 69.10

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 152 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. C. Robert Brown, Sr.
Mailing Address 8675 WestCott

City State Zip Code
Germantown TN 38138-7738

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

Name of Employer Occupation
UCL Financial Group President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861579

Amount of Each Receipt this Period
62.50

B. Full Name (Last, First, Middle Initial)
Mr. David W. Daigle
Mailing Address 5300 Stone Place Ave

City State Zip Code
Gillette WY 82718

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

Name of Employer Occupation
Mountain West Farm Bureau Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861621

Amount of Each Receipt this Period
21.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard G. Ek
Mailing Address 13831 51st DR SE

City State Zip Code
Everett WA 98208-9543

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

Name of Employer Occupation
Ek & Ek Insurance Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 218.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8861625

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **104.50**

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 153 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Richard E. Keeling	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 9507 Wessex PI	Transaction ID: 8861629
	City State Zip Code Louisville KY 40222-5042	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Transamerica	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) Ms. Ernestine S. Cohn	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 1773 139th Avenue P O Box 3206	Transaction ID: 8861635
	City State Zip Code San Leandro CA 94578	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Robinson - Cohn & Co. Insurance Agency	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Ms. Alyson J. Guest	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 10333 Richmond Avenue Suite 1050	Transaction ID: 8861661
	City State Zip Code Houston TX 77042-4244	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer MetLife Financial Services	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	80.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 154 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas P. Cunningham

Mailing Address 4292 Rangeview Drive

City State Zip Code
Billings MT 59106-4738

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

Name of Employer Occupation
Farm Bureau Financial Ser- Agency Manager
vices

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 569.40

Date of Receipt

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

Transaction ID: 8861695

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)
Ms. Rita J. Robinson

Mailing Address 3777 Parkwood Way

City State Zip Code
West Linn OR 97068-1045

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

Name of Employer Occupation
Robinson Financial Group General Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt

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

Transaction ID: 8861703

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph E. Pittman

Mailing Address 7430 Vinton Street

City State Zip Code
Omaha NE 68124-3452

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

Name of Employer Occupation
Creative Association Mana- Insurance Agent
gement

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt

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

Transaction ID: 8861733

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

92.40

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 155 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. David Lee Randles

Mailing Address 10526 237th Place SW

City Edmonds State WA Zip Code 98020-5769

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

Name of Employer Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8861747

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Alan R. Zalewski

Mailing Address 6908 North 27th Street

City Tacoma State WA Zip Code 98407-1002

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

Name of Employer Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8861757

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Ms. Sherry Soileau

Mailing Address 1122 Castle Kirk Drive

City Baton Rouge State LA Zip Code 70808-6025

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

Name of Employer Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8861763

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional) ► 87.50

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 156 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Sharon L. Sparling

Mailing Address P.O. Box 1914

City State Zip Code
Mount Vernon WA 98273-1914

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

Name of Employer Occupation
Occupation PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861789

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Allan B. Schon

Mailing Address 441 16th NW

City State Zip Code
Minot ND 58703-1941

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

Name of Employer Occupation
Executive Financial 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861797

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph K. Roberts

Mailing Address 4000 S 36th Street

City State Zip Code
Lincoln NE 68506-4809

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

Name of Employer Occupation
Midlands 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861801

Amount of Each Receipt this Period
22.50

SUBTOTAL of Receipts This Page (optional) ► **102.50**

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 157 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. James John Silbernagel

Mailing Address W 2329 Capital Drive

City State Zip Code
Campbellsport WI 53010-3010

FEC ID number of contributing federal political committee. C

Name of Employer: Silbernagel & Jasen Financial
Occupation: CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8861807

Amount of Each Receipt this Period 60.00

B.

Full Name (Last, First, Middle Initial)
Mr. Marston Lee Rogers

Mailing Address P. O. Box 3207

City State Zip Code
Gulfport MS 39505-3207

FEC ID number of contributing federal political committee. C

Name of Employer: Rogers Insurance
Occupation: PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 417.50

Date of Receipt M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8861857

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bradley W. Pratt

Mailing Address 2118 Peregrine Ln

City State Zip Code
Mankato MN 56003

FEC ID number of contributing federal political committee. C

Name of Employer: Pratt Kutzke & Associates LLP
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
12 / 10 / 2009

Transaction ID: 8861879

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 110.00

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 158 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Clinton J. Parks

Mailing Address 4848 Rivervale St Rt

City State Zip Code
Soquel CA 95073-9727

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

Name of Employer Occupation
Clinton J. Parks Ins. Ser- Insurance Agent
vs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861893

Amount of Each Receipt this Period
22.50

B. Full Name (Last, First, Middle Initial)
Mr. John Palladino, Jr.

Mailing Address 15060 Becky Lane

City State Zip Code
Monte Sereno CA 95030-2106

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

Name of Employer Occupation
Link-Allen Benefit Group V.P

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 604.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861903

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard R. Rios

Mailing Address 8720 El Chapul Way

City State Zip Code
Fair Oaks CA 95628-5454

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

Name of Employer Occupation
Brecek & Young Advisors Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8861959

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **114.50**

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 159 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. George R. Sutphen, III

Mailing Address 12 Welisewitz Rd

City Ringoes State NJ Zip Code 08551-1711

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

Name of Employer Mutual of Omaha Companies Occupation Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt 12 / 10 / 2009
Transaction ID: 8861967
Amount of Each Receipt this Period 25.20

B.

Full Name (Last, First, Middle Initial)
Mr. Harry S. Rosnick

Mailing Address 3435 Jefferson Davis Hwy
P.O. Box 360

City Fredericksburg State VA Zip Code 22404-0360

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

Name of Employer Nationwide Insurance Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 10 / 2009
Transaction ID: 8861999
Amount of Each Receipt this Period 30.00

C.

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

Mailing Address 1458 W. Bahia Court

City Gilbert State AZ Zip Code 85233-5600

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

Name of Employer Southeast Arizona Ins. SE-
rvices, LTD Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2048.36

Date of Receipt 12 / 10 / 2009
Transaction ID: 8862025
Amount of Each Receipt this Period 126.00

SUBTOTAL of Receipts This Page (optional) ► **181.20**

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 160 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Deborah A. Stratton-Flandro

Mailing Address 2595 Spanbauer Rd

City State Zip Code
American Falls ID 83211-5223

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

Name of Employer Farm Bureau -Power County Office
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.00

Date of Receipt

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

Transaction ID: 8862037

Amount of Each Receipt this Period
27.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael J. Edens

Mailing Address 1012 Endicott

City State Zip Code
Chattanooga TN 37405

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

Name of Employer John Hancock Financial Services
Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
604.00

Date of Receipt

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

Transaction ID: 8862097

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Ms. Sherri A. Rush

Mailing Address 2140 Jefferson St Suite C

City State Zip Code
Napa CA 94559

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

Name of Employer Pathway Fin. & Ins. Svcs.- LLC
Occupation Registered Rep.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID: 8862109

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **94.00**

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 161 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard Roy

Mailing Address 103 Fourth Street

City State Zip Code
Middlesex NJ 08846-2117

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

Name of Employer Occupation
Roy Agency BROKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: 8862145

Amount of Each Receipt this Period
21.00

B.

Full Name (Last, First, Middle Initial)
Ms. Nancy P. Cubberley

Mailing Address P O Box 5109

City State Zip Code
Sevierville TN 37864-5109

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

Name of Employer Occupation
Cubberley Agency, Inc. MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 337.50

Date of Receipt

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

Transaction ID: 8862165

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Paul T. Tanigawa

Mailing Address 51 Keleawe Street

City State Zip Code
Makawao HI 96768

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

Name of Employer Occupation
Paul T. Tanigawa Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 8862183

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ►

63.50

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 162 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Miguel Paredes

Mailing Address 5927 Tamarisk

City State Zip Code
San Luis Obispo CA 93401-8281

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

Name of Employer Occupation
Neal Truesdale Ins. Benefits

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2009

Transaction ID: 8862207

Amount of Each Receipt this Period
42.00

B.

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

Mailing Address 8208 N Freshwater Lane

City State Zip Code
Tucson AZ 85741

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

Name of Employer Occupation
Mutual of Omaha Companies Sales Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 236.40

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2009

Transaction ID: 8862265

Amount of Each Receipt this Period
25.20

C.

Full Name (Last, First, Middle Initial)
Mr. Charles I. Daniels, III

Mailing Address 2424 Merlot Dr

City State Zip Code
Napa CA 94558

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

Name of Employer Occupation
Harvest Financial, LLC Family Financial Coach

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2009

Transaction ID: 8862277

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **102.20**

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 163 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Brian D. Boesiger

Mailing Address 7021 S. 33rd Street

City Lincoln State NE Zip Code 68516-4886

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

Name of Employer Benefit Management Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8862319

Amount of Each Receipt this Period 37.50

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony D. Chapman

Mailing Address 210 East 2nd Ave, Suite 300

City Rome State GA Zip Code 30161-1707

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

Name of Employer AIMC Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 10 / 2009

Transaction ID: 8862331

Amount of Each Receipt this Period 21.00

C.

Full Name (Last, First, Middle Initial)
Mr. Salvatore D. Gagliardi, Jr.

Mailing Address 401 Sheffied Ct.

City Runnemede State NJ Zip Code 08078-1826

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

Name of Employer American General Life and Accident Ins Occupation Financial Services Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.60

Date of Receipt 12 / 10 / 2009

Transaction ID: 8862339

Amount of Each Receipt this Period 25.20

SUBTOTAL of Receipts This Page (optional) ► **83.70**

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 164 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Michael R. Spielmann

Mailing Address 15 Pirates Alley

City State Zip Code
Lafayette LA 70508

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

Name of Employer Corporate Financial Strategies
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862363

Amount of Each Receipt this Period
22.50

B. Full Name (Last, First, Middle Initial)
Mr. James W. Simons

Mailing Address 1712 13th Street NW

City State Zip Code
Minot ND 58703

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

Name of Employer First Command Financial Planning
Occupation 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
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862369

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas D. Voshall

Mailing Address 426 Towne Valley Dr

City State Zip Code
Woodstock GA 30188-2636

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

Name of Employer Vineyard Financial Development
Occupation Financial Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862415

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **62.50**

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 165 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Scott R. Wollenberg

Mailing Address 14702 Haven Meadows Ln

City State Zip Code
Humble TX 77396-3753

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

Name of Employer Occupation
IMG Financial Group Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862447

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. Theron R. Dupree

Mailing Address 511 Comanche Trail

City State Zip Code
West Monroe LA 71291-8165

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

Name of Employer Occupation
MetLife Financial Services Field Service Rep.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862461

Amount of Each Receipt this Period
22.50

C. Full Name (Last, First, Middle Initial)
Ms. Peggy D. Smith

Mailing Address 8011 Bell Road

City State Zip Code
Knoxville TN 37938-2302

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

Name of Employer Occupation
Portamedic Regional Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862465

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► 56.00

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 166 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Marvin L. Spreen

Mailing Address 5759 Mount Vernon Rd

City State Zip Code
Brenham TX 77833-7708

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

Name of Employer Occupation
Thrivent Financial for Lu-therans Financial Associate

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 312.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862475

Amount of Each Receipt this Period
26.00

B.

Full Name (Last, First, Middle Initial)
Mr. David L. Sparks

Mailing Address PO Box 3509

City State Zip Code
Hickory NC 28603

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

Name of Employer Occupation
Capital Concepts Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1039.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862483

Amount of Each Receipt this Period
115.50

C.

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

Mailing Address 1022 RT 34B

City State Zip Code
King Ferry NY 13081

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

Name of Employer Occupation
Edward C. Moscato Insuran- ce and Financ Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862487

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **191.50**

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 167 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Glenn C. Stocker

Mailing Address 913 Goodlander Circle

City State Zip Code
Selah WA 98942-9405

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

Name of Employer Occupation
Polish National Alliance Sales Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862493

Amount of Each Receipt this Period
12.50

B.

Full Name (Last, First, Middle Initial)
Mr. George W. Williams, Jr.

Mailing Address 4109 Woodway Dr

City State Zip Code
Monroe LA 71201

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

Name of Employer Occupation
Benefit Plan Service President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862559

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Mrs. Jennifer L. Alford

Mailing Address 6955 Kinsman Drive

City State Zip Code
Sylvania OH 43560

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

Name of Employer Occupation
Creative Financial Partners Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862577

Amount of Each Receipt this Period
25.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 168 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mrs. Rebecca J. Flickinger

Mailing Address 1900 W Hart Ave

City State Zip Code
Orange TX 77630-3639

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

Name of Employer Occupation
Flickinger Insurance Agen- OWNER
cy

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 264.00

Date of Receipt

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

Transaction ID: 8862589

Amount of Each Receipt this Period

23.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jesse W. Markham

Mailing Address 1122 Elm St
Suite 802

City State Zip Code
Honolulu HI 96814-2209

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

Name of Employer Occupation
Aflac District Sales Coordinator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 425.00

Date of Receipt

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

Transaction ID: 8862683

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Ms. Cheryln L. Houpo

Mailing Address 659 Akakuu St

City State Zip Code
Wailuku HI 96793

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

Name of Employer Occupation
Royal Ins. Agency Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.50

Date of Receipt

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

Transaction ID: 8862693

Amount of Each Receipt this Period

12.50

SUBTOTAL of Receipts This Page (optional) ▶

85.50

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 169 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Adam Cole McConathy	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 607 Kendal Ridge	Transaction ID: 8862701
	City State Zip Code Monroe LA 71201	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MetLife Financial Services Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 435.00	

B.	Full Name (Last, First, Middle Initial) Mr. Mike Ford	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 21656 N 59th Ln	Transaction ID: 8862717
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 18.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Pro Formance Financial Group Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Mr. Ted Y. Withrow	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 142 Deer Creek Road	Transaction ID: 8862775
	City State Zip Code Edmond OK 73003	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer State Farm Insurance Companies Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 302.40	

SUBTOTAL of Receipts This Page (optional)	▶	93.20
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 170 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Phil M. Haug

Mailing Address 114 38 1/2 Ave, W

City State Zip Code
West Fargo ND 58078

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

Name of Employer Northern Lights Agency 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862873

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Adi Ringer

Mailing Address 888 Vista Brisa

City State Zip Code
San Luis Obispo CA 93405

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

Name of Employer BridgePoint Custom Strategies Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862887

Amount of Each Receipt this Period
22.50

C.

Full Name (Last, First, Middle Initial)
Mr. Gregory Gianakis

Mailing Address 5315 S Conquistador St

City State Zip Code
Las Vegas NV 89148

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

Name of Employer Wealth Strategies Group Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8862907

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **77.70**

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 171 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Mr. Mark E. Kull		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address 3008 S 6th St		Transaction ID: 8862917		
	City Louisville	State KY	Zip Code 40208	Amount of Each Receipt this Period 25.20	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Northwestern Mutual	Occupation AGENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.80			

B.	Full Name (Last, First, Middle Initial) Mrs. Lori W. Broussard		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address P O Box 292		Transaction ID: 8862973		
	City Estherwood	State LA	Zip Code 70534-0292	Amount of Each Receipt this Period 21.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Great Southern Agency	Occupation AGENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00			

C.	Full Name (Last, First, Middle Initial) Mr. Russell W. Crooks, Jr.		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address 10108 Bennington Dr.		Transaction ID: 8862977		
	City Tampa	State FL	Zip Code 33626	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retirement Benefits Group	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional)	▶	71.20
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 172 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mrs. Casey Lou-Ann Kolar		Date of Receipt																					
	Mailing Address PO Box 280		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	0		2	0	0	9														
City	State	Zip Code		Transaction ID: 8863093																				
Currituck	NC	27929-0280		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C		13.75																				
Name of Employer Southern Farm Bureau Life Insurance		Occupation AGENT																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		275.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey A. Blum		Date of Receipt																					
	Mailing Address P.O. Box 807		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	0		2	0	0	9														
City	State	Zip Code		Transaction ID: 8863135																				
Jacksonville	OR	97530		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C		12.50																				
Name of Employer Jones and Associates		Occupation Independent Agent																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		226.00																						

C.	Full Name (Last, First, Middle Initial) Mr. John Elias Calles		Date of Receipt																					
	Mailing Address 650 University Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	0		2	0	0	9														
City	State	Zip Code		Transaction ID: 8863137																				
Coral Gables	FL	33134		Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C		22.50																				
Name of Employer Union Central - Miami Agency		Occupation Manager																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		270.00																						

SUBTOTAL of Receipts This Page (optional)	▶	48.75
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 173 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Adam D. Weeman

Mailing Address 6216 W Coughran Ct

City State Zip Code
Sioux Falls SD 57106

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

Name of Employer Occupation
Thrivent Financial Financial Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863177

Amount of Each Receipt this Period
22.50

B.

Full Name (Last, First, Middle Initial)
Mr. James C. Clabuesch

Mailing Address 11375 Fairway Dr

City State Zip Code
Roscommon MI 48653

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

Name of Employer Occupation
Clabuesch Financial Services 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 Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863207

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Connie Y. Golleher

Mailing Address PO Box 255

City State Zip Code
Mc Lean VA 22101-0255

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

Name of Employer Occupation
The Holleman Companies Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863229

Amount of Each Receipt this Period
51.00

SUBTOTAL of Receipts This Page (optional) ► **123.50**

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 174 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James E. Miller

Mailing Address 1550 Faraday Circle

City State Zip Code
Fort Collins CO 80525

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

Name of Employer Farm Bureau Ins Co Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863327

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mr. Matthew J. Grace

Mailing Address 638 L St NE

City State Zip Code
Washington DC 20002-3544

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

Name of Employer First Financial Group Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863365

Amount of Each Receipt this Period
10.20

C. Full Name (Last, First, Middle Initial)
Mr. Bradley P. Schlafer

Mailing Address W 6176 Colonial Drive

City State Zip Code
Appleton WI 54914

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

Name of Employer Schlafer Financial Services, LLC Occupation Financial Services Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863373

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► **49.20**

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 175 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Chase Ryan Sinquefield

Mailing Address 214 West College Street

City State Zip Code
Murfreesboro TN 37130-3532

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

Name of Employer
Miller Loughry Beach Insurance

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
12 / 10 / 2009

Transaction ID: 8863413

Amount of Each Receipt this Period

12.50

B.

Full Name (Last, First, Middle Initial)
Mr. Larry G. Johnson

Mailing Address 44466 Albert

City State Zip Code
Plymouth MI 48170

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

Name of Employer
Farm Bureau Ins Co

Occupation
AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8863415

Amount of Each Receipt this Period

37.50

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Clark Boyce

Mailing Address 2125 Hillway Dr

City State Zip Code
Baton Rouge LA 70810-7740

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

Name of Employer
The Besselman & Little Agency

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 10 / 2009

Transaction ID: 8863531

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

71.00

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 176 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Jill M. Douglass

Mailing Address 2932 Sunstone St.

City State Zip Code
Las Vegas NV 89128-7742

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

Name of Employer Country Financial Occupation District_Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: 8863609

Amount of Each Receipt this Period
-27.00

B. Full Name (Last, First, Middle Initial)
Mr. Dennis D. Hruby

Mailing Address 3530 Hillside Cir

City State Zip Code
Lincoln NE 68506

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

Name of Employer Dennis Hruby Insurance 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 Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: 8863672

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Dean G. Macheras

Mailing Address 61 Oakwood Dr

City State Zip Code
Monroe LA 71203-2776

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

Name of Employer Dean Macheras Insurance Agency Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: 8863686

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **373.00**

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 177 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Jason E. Brooks

Mailing Address 4680 Woodbine Circle

City State Zip Code
West Bloomfield MI 48323-2289

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

Name of Employer: Brooks Financial Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 14 / 2009
Transaction ID: 8863774
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jonas L. Borntrager

Mailing Address 3861 Singers Glen Rd

City State Zip Code
Harrisonburg VA 22802

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

Name of Employer: Jonas Borntrager Insurance Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 14 / 2009
Transaction ID: 8863782
Amount of Each Receipt this Period: 35.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Shelita Stuart

Mailing Address 8034 Brighton Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer: Walden Financial Network Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.50

Date of Receipt: 12 / 14 / 2009
Transaction ID: 8863810
Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► **327.50**

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 178 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Thomas D. Currey

Mailing Address 701 W. Church St

City State Zip Code
Grand Prairie TX 75050

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

Name of Employer Occupation
TDC Financial Services General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 649.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9

Transaction ID: 8863876

Amount of Each Receipt this Period
-208.00

B. Full Name (Last, First, Middle Initial)
Mr. Matthew B. Stone

Mailing Address 212 Stoney Dr.

City State Zip Code
Durham NC 27703-2901

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

Name of Employer Occupation
Southern Farm Bureau Life Ins Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8863944

Amount of Each Receipt this Period
24.75

C. Full Name (Last, First, Middle Initial)
Mr. Greg W. Jacobs

Mailing Address 1350 Grand Summitt Drive #116

City State Zip Code
Reno NV 89523

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

Name of Employer Occupation
Hendricks Insurance Agency Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864006

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **-158.05**

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 179 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Gordon D. Schuster

Mailing Address 1230 Leanne Pl

City State Zip Code
Wenatchee WA 98801-3253

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

Name of Employer Occupation
New York Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8864024

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Brad A. Tapscott

Mailing Address 523 Castle Hall Rd

City State Zip Code
Mount Pleasant SC 29464

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

Name of Employer Occupation
Ameriprise Financial Certified Financial Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8864030

Amount of Each Receipt this Period
31.00

C.

Full Name (Last, First, Middle Initial)
Ms. Monica J. Lawfield

Mailing Address 6851 Caballero Dr.

City State Zip Code
Jacksonville FL 32217-2772

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

Name of Employer Occupation
Waddell & Reed, Inc. Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.40

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8864074

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional) ► **81.20**

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 180 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn R. Watson
 Mailing Address 2032 Hollis
 City State Zip Code
 Abilene TX 79605-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ohio National Financial Insurance Agent
 Services
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 553.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 9
Transaction ID: 8864090
 Amount of Each Receipt this Period
 -42.00

B. Full Name (Last, First, Middle Initial)
Mr. Melvin Chilewich
 Mailing Address 316 Chanticleer Dr
 City State Zip Code
 Cherry Hill NJ 08003-4824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Chilewich Financial Resou- Insurance Agent
 rces
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 9
Transaction ID: 8864140
 Amount of Each Receipt this Period
 -36.00

C. Full Name (Last, First, Middle Initial)
Mrs. Irene Parker
 Mailing Address 131 Oakwood Ave
 City State Zip Code
 Edison NJ 08837-2308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Parker Ins. Svcs. Agent/Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 318.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 9
Transaction ID: 8864158
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional) ► **-18.00**
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 181 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Richard A. Beale

Mailing Address 4221 Tamarisk Drive

City State Zip Code
Oklahoma City OK 73120

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

Name of Employer
Beale Professional Services
Occupation
President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	0	9

Transaction ID: 8864162
 Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer A. Borislow

Mailing Address 15 Meetinghouse Rd.

City State Zip Code
Methuen MA 01844-2369

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

Name of Employer
Jennifer Borislow Ins. Agency
Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	0	9

Transaction ID: 8864172
 Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. A. Ainslie Stanford

Mailing Address 10024 S. Louisville Ave

City State Zip Code
Tulsa OK 74137-5221

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

Name of Employer
Northwestern Mutual Financial Network
Occupation
Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
602.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	0	9

Transaction ID: 8864210
 Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 182 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. William D. Stanley

Mailing Address 37159 N Cremona Ave.

City State Zip Code
Lake Villa IL 60046-7731

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

Name of Employer Occupation
American Family Insurance 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
1 2 / 1 6 / 2 0 0 9

Transaction ID: 8864224

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sharon G. Heierman

Mailing Address 2990 Kemp Rd

City State Zip Code
Havana FL 32333

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

Name of Employer Occupation
NAIFA - Florida CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 554.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864344

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Ms. Brenda S. Speer

Mailing Address 126 Sunset Dr

City State Zip Code
Pulaski TN 38478-3631

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

Name of Employer Occupation
Professional Benefit Solutions, LLC PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864360

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **317.00**

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 183 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Robin Lynn Kagan

Mailing Address 1025 12th

City Bellingham State WA Zip Code 98225

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

Name of Employer Bankers Life Insurance Company Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 10 / 2009
Transaction ID: 8864364
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Mr. David L. Belk

Mailing Address 2 Bay Tree Court

City Greensboro State NC Zip Code 27455

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

Name of Employer Belk Financial Group Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 635.80

Date of Receipt 12 / 10 / 2009
Transaction ID: 8864398
 Amount of Each Receipt this Period 55.00

C. 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 Clearline Financial Group Occupation Field Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 12 / 10 / 2009
Transaction ID: 8864412
 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ► 225.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Reginald Allen Brewer

Mailing Address 2253 Mt. Vernon Court

City Auburn State AL Zip Code 36830

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

Name of Employer Peoples Savings Life Ins Co Occupation Chief Operating Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 10 / 2009
Transaction ID: 8864438
Amount of Each Receipt this Period 21.00

B. Full Name (Last, First, Middle Initial)
Mr. Christopher Luke Simons

Mailing Address 713 Carper Dr

City Artesia State NM Zip Code 88210-2344

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

Name of Employer Simons and Associates Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 604.80

Date of Receipt 12 / 10 / 2009
Transaction ID: 8864474
Amount of Each Receipt this Period 50.40

C. Full Name (Last, First, Middle Initial)
Mr. Roger Goren

Mailing Address 25 Indian Rd Apt 4B

City New York State NY Zip Code 10034-1018

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

Name of Employer Goren and Goren, Ltd. Occupation Financial Professional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 17 / 2009
Transaction ID: 8864508
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 571.40

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 185 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Neal A Kloke

Mailing Address 2512 Claudia Ct

City State Zip Code
Bellingham WA 98226

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

Name of Employer Occupation
NWM Financial Servies, Inc Tax & Fiancial Advisor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864516

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Dr. Michael W. Grossi

Mailing Address 119 Garfield Street

City State Zip Code
North Providence RI 02904

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

Name of Employer Occupation
One America Financial Partners/ TEAM F General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 358.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864520

Amount of Each Receipt this Period
50.40

C.

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

Mailing Address 1287 Harrison Pond Drive

City State Zip Code
Columbus OH 43215

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

Name of Employer Occupation
NMFN - Kemelgor Fin. Group Wealth Management Advisor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 875.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 9

Transaction ID: 8864538

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **330.40**

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 186 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Mary A. Cannady

Mailing Address P. O. Box 799

City State Zip Code
Walterboro SC 29488-0799

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

Name of Employer Cannady Agency Inc. Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: 8864560

Amount of Each Receipt this Period
425.00

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

Mailing Address 204 Bloomfield Avenue #155

City State Zip Code
Delmar IA 52037-9346

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

Name of Employer Paul Miller Insurance Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: 8864582

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph L Morton, III

Mailing Address 5487 N Bach

City State Zip Code
Meridian ID 83642

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

Name of Employer Intermountain Legal Group Occupation Attorney At Law

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1512.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864602

Amount of Each Receipt this Period
126.00

SUBTOTAL of Receipts This Page (optional) ► **581.00**

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

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

Use separate schedule(s)
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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Ivan C. Hinrichs

Mailing Address 2418 La Maison Drive

City State Zip Code
Charlotte NC 28226-6200

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

Name of Employer Occupation
Hinrichs Financial Corporate Benefits PRINCIPAL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: 8864606

Amount of Each Receipt this Period
275.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward J. Feiman

Mailing Address 11015 Random Valley Circle

City State Zip Code
Parker CO 80134-6010

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

Name of Employer Occupation
Assured Equity Management-Corp CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: 8864624

Amount of Each Receipt this Period
500.00

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 Occupation
NAIFA Senior Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1251.75

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: 8864648

Amount of Each Receipt this Period
52.25

SUBTOTAL of Receipts This Page (optional) ► **827.25**

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 188 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. James D. Schulz		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 6601 South 66th. St.		Transaction ID: 8864674		
	City Lincoln	State NE	Zip Code 68516-3657	Amount of Each Receipt this Period -1250.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Midlands Financial Benefits		Occupation President		Aggregate Year-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Theodore B. Erck		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 2206 Briarbrook		Transaction ID: 8864678		
	City Houston	State TX	Zip Code 77042	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Medical Profiles, Inc.		Occupation Sales Manager		Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Ms. Elaine J. Fremling		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 715 Northridge Way		Transaction ID: 8864688		
	City West Fargo	State ND	Zip Code 58078-4365	Amount of Each Receipt this Period 12.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Northwestern Mutual		Occupation AGENT		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	-1138.00
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 189 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Francis J. Gingras

Mailing Address 7057 Deepwater Pt. Rd.

City Williamsburg State MI Zip Code 49690-9549

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

Name of Employer Northwestern Mutual Occupation Managing Directors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2009

Transaction ID: 8864704

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City Washington State VA Zip Code 20001-5006

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

Name of Employer NAIFA Occupation Sr VP Law & Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 541.60

Date of Receipt 12 / 18 / 2009

Transaction ID: 8864748

Amount of Each Receipt this Period 31.25

C. Full Name (Last, First, Middle Initial)
Mr. Craig Kelly Davidson

Mailing Address 6 Chelle Cv

City Little Rock State AR Zip Code 72223-5526

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

Name of Employer Occupation Financial Services Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 18 / 2009

Transaction ID: 8864766

Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional) ► **401.25**

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
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FOR LINE NUMBER: PAGE 190 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Paul S Brawner

Mailing Address 3610 Loma Farm Rd.

City State Zip Code
Tallahassee FL 32309-1711

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

Name of Employer Occupation
NAIFA- Florida Director, Professional Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8864802

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony G. Engrassia

Mailing Address 6810 Bynum Pond Court

City State Zip Code
Battleboro NC 27809

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

Name of Employer Occupation
Engrassia Investments LLC Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 412.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: 8864810

Amount of Each Receipt this Period
412.50

C.

Full Name (Last, First, Middle Initial)
Mr. Ronald B. Merry

Mailing Address 501 Fox Ct.

City State Zip Code
Great Falls MT 59404-3875

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

Name of Employer Occupation
The Principal Financial Group Senior Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: 8864882

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional) ► **1037.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial)
Ms. Linda Ray

Mailing Address 944 Sena Drive

City State Zip Code
Metairie LA 70005

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

Name of Employer Occupation
Better Benefits Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: 8864906

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael J. Krupin

Mailing Address 4803 Lockgreen Circle

City State Zip Code
Richmond VA 23226-1746

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

Name of Employer Occupation
Gilbert - Krupin Ins. Services, LLC Member

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: 8864910

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Patricia M. Matthew

Mailing Address 536 Lincoln Ave
PO Box 1225

City State Zip Code
Big Sandy MT 59520

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

Name of Employer Occupation
Waddell & Reed Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt
MM / DD / YYYY
12 / 21 / 2009

Transaction ID: 8864936

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **810.00**

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 192 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Raymond D. Kojetin

Mailing Address 404 24th Ave NE

City State Zip Code
Great Falls MT 59404-1556

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

Name of Employer Occupation
Lafayette Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: 8864938

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. Raymond D. Kojetin

Mailing Address 404 24th Ave NE

City State Zip Code
Great Falls MT 59404-1556

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

Name of Employer Occupation
Lafayette Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: 8864940

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Mr. George D. Lumbert

Mailing Address 816 S 2nd St

City State Zip Code
Alhambra CA 91801-4316

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

Name of Employer Occupation
Lumbert Insurance Services OWNER

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 2 / 2 2 / 2 0 0 9

Transaction ID: 8865006

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **340.00**

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 193 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

<p>A. Full Name (Last, First, Middle Initial) Mr. Mark J. Hanna</p> <p>Mailing Address 1390 Willow Path Road #940</p> <p>City State Zip Code Concord CA 94520</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hanna Global Solutions CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 22 / 2009</p> <p>Transaction ID: 8865012</p> <p>Amount of Each Receipt this Period 1250.00</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Mr. Charles M Olson, II</p> <p>Mailing Address 16278 Jefferson St</p> <p>City State Zip Code Omaha NE 68135</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation OCI Insurance and Financial Services Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 222.50</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2009</p> <p>Transaction ID: 8865024</p> <p>Amount of Each Receipt this Period 17.50</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Mr. Tom B. Brown</p> <p>Mailing Address 5084 W. Whiteland Rd</p> <p>City State Zip Code Greenwood IN 46143-9391</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Northwestern Mutual Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 22 / 2009</p> <p>Transaction ID: 8865058</p> <p>Amount of Each Receipt this Period 500.00</p>
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SUBTOTAL of Receipts This Page (optional)	1767.50
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 194 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. James M. Clary

Mailing Address 2048 N. Burling

City State Zip Code
Chicago IL 60614

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

Name of Employer Mullin Consulting, Inc. Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: 8865169

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard T. Romano

Mailing Address 441 Hector Avenue

City State Zip Code
Metairie LA 70005-4411

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

Name of Employer Northwestern Mutual Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: 8865177

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Janne D. Thung

Mailing Address 2815 Mitchell Dr Suite 112

City State Zip Code
Walnut Creek CA 94598

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

Name of Employer Allstate Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: 8865181

Amount of Each Receipt this Period
250.00

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: PAGE 195 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Zachary D Stafford

Mailing Address 7139 Sheffield Ave

City State Zip Code
Baton Rouge LA 70806-7453

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

Name of Employer The Besselman & Little Agency
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8865203

Amount of Each Receipt this Period
21.00

B.

Full Name (Last, First, Middle Initial)
Mr. Leo Thomas

Mailing Address 1925 Century Park E 4th Fl

City State Zip Code
Los Angeles CA 90067-2701

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

Name of Employer PRB Inc.
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
1 2 / 2 2 / 2 0 0 9

Transaction ID: 8865217

Amount of Each Receipt this Period
62.50

C.

Full Name (Last, First, Middle Initial)
Mr. Scott A. Mullen

Mailing Address 165 Annable Point Rd.
PO Box 659

City State Zip Code
Centerville MA 02632-2431

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

Name of Employer Prescott Brokerage Services, Inc.
Occupation Senior Vice President Marketing/Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8865229

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional) ► **104.50**

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 196 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Douglas K. Flink

Mailing Address 4226 Mcdonald Drive North

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Foster, Klima & Company General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 9

Transaction ID: 8865331

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Nathan M. Perlmutter

Mailing Address 12 Beekman Place #2E

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Guardian Life Insurance Co. of America President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 9

Transaction ID: 8865347

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Mr. Melvin Chilewich

Mailing Address 316 Chanticleer Dr

City State Zip Code
Cherry Hill NJ 08003-4824

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

Name of Employer Occupation
Chilewich Financial Resources Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 396.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: 8865391

Amount of Each Receipt this Period
36.00

SUBTOTAL of Receipts This Page (optional) ► 1336.00

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 197 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Ronald J. Adams		Date of Receipt MM / DD / YYYY 12 / 10 / 2009		
	Mailing Address 3819 Country Haven Ct		Transaction ID: 8865441		
	City Sacramento	State CA	Zip Code 95821-2800	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Ronald Adams Fin. Planning Group	Occupation Financial & Estate Planner	Aggregate Year-to-Date 504.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Mr. John J. Tarditi, Jr.		Date of Receipt MM / DD / YYYY 12 / 23 / 2009		
	Mailing Address 412 Washington Ave		Transaction ID: 8865495		
	City Haddonfield	State NJ	Zip Code 08033-3327	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Conner Strong Companies, LLC	Occupation Vice Chairman	Aggregate Year-to-Date 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mr. James J. Van Ham		Date of Receipt MM / DD / YYYY 12 / 23 / 2009		
	Mailing Address 2748 Newport Drv		Transaction ID: 8865555		
	City Naperville	State IL	Zip Code 60565-6711	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Country Insurance and Financial Servc	Occupation Insurance Agent	Aggregate Year-to-Date 230.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	467.00
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 198 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mrs. Amber R. Zamora

Mailing Address 1410 Bianchi Ln

City State Zip Code
Santa Cruz CA 95062

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

Name of Employer Occupation
P.M. Associates Insurance AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8865601

Amount of Each Receipt this Period
21.00

B. Full Name (Last, First, Middle Initial)
Mrs. Candace H. Berkman

Mailing Address 13095 Seagrove Street

City State Zip Code
San Diego CA 92130

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: 8865605

Amount of Each Receipt this Period
22.50

C. Full Name (Last, First, Middle Initial)
Haydee Dawson

Mailing Address 2544 E Fairfield St

City State Zip Code
Mesa AZ 85213-5305

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

Name of Employer Occupation
Country Financial Registered Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.20

Date of Receipt
MM / DD / YYYY
12 / 23 / 2009

Transaction ID: 8865855

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **103.50**

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 199 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Randhir Singh Judge		Date of Receipt	
	Mailing Address 45790 Cayuga Ct		M M / D D / Y Y Y Y Y 1 2 / 2 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 8865891
	Fremont	CA	94539-6815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Judge for Yourself Inc		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00		

B.	Full Name (Last, First, Middle Initial) Mr. Gerald G. Hartman		Date of Receipt	
	Mailing Address 3822 Gemini Cir		M M / D D / Y Y Y Y Y 1 2 / 2 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 8865905
	Boise	ID	83709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		360.00	
Name of Employer Ins. Network America		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		

C.	Full Name (Last, First, Middle Initial) Mr. Mitchell B. Glover		Date of Receipt	
	Mailing Address 6700 Old Darby Trail		M M / D D / Y Y Y Y Y 1 2 / 2 5 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 8866015
	Ada	MI	49301-8360	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		42.00	
Name of Employer Northwestern Mutual Finan- cial Network		Occupation Managing Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 542.00		

SUBTOTAL of Receipts This Page (optional) ▶

902.00

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 200 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Arthur C. Jetter, Jr.

Mailing Address 13624 Parker Circle

City State Zip Code
Omaha NE 68154-3829

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

Name of Employer Occupation
Art Jetter & Company President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866151

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. R. Clifford Berg, Jr.

Mailing Address 113 N. Village Lane

City State Zip Code
Chadds Ford PA 19317-9327

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

Name of Employer Occupation
Financial House 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
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866153

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Douglas K. Flink

Mailing Address 4226 Mcdonald Drive North

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Foster, Klima & Company General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866155

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 201 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Brian R. Phares

Mailing Address 1420 Hackberry Road

City State Zip Code
North Platte NE 69101-6841

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

Name of Employer Occupation
Phares Financial Services Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866157

Amount of Each Receipt this Period
250.00

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

Mailing Address 3619 S 55th St

City State Zip Code
Omaha NE 68106-4415

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

Name of Employer Occupation
Ameritas Life Insurance Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866167

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. Howard B. Cowan

Mailing Address 941 Park Ave 8B

City State Zip Code
New York NY 10028-0318

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

Name of Employer Occupation
Cowan Financial Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866185

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **825.00**

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 202 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Louis P. DiCerbo, II

Mailing Address 33 Chapel Road

City State Zip Code
Manhasset NY 11030-3601

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

Name of Employer Occupation
PCP Benefits Plans, Ltd CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866189

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bruce F. McGuirk

Mailing Address 6002 Armfield Court

City State Zip Code
Summerfield NC 27358-9128

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

Name of Employer Occupation
John Hancock Brokerage Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866193

Amount of Each Receipt this Period
550.00

C.

Full Name (Last, First, Middle Initial)
Mr. George C. Finklea, Jr.

Mailing Address 1707 Waterford Dr

City State Zip Code
Wilson NC 27896

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

Name of Employer Occupation
State Farm Ins. Multiline Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866205

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ► **1325.00**

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 203 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 3619 S 55th St

City State Zip Code
Omaha NE 68106-4415

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

Name of Employer Occupation
Ameritas Life Insurance Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1625.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866227

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Arthur D. Shankman

Mailing Address 8 Mt Vernon Court

City State Zip Code
Livingston NJ 07039-2735

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

Name of Employer Occupation
Arthur D Shankman & Company Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866263

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
Mr. John M. Qualy

Mailing Address 625 S. Skinker #1203

City State Zip Code
St. Louis MO 63105-2301

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

Name of Employer Occupation
Northwestern Mutual General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866271

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 204 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Douglas F. Bennetti

Mailing Address 806 Quail Run

City State Zip Code
Wyoming DE 19934-9548

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

Name of Employer Occupation
Nationwide Insurance Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: 8866285

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Leonard Allison

Mailing Address 401 Wampanoag Trail, #100

City State Zip Code
Riverside RI 02915-1507

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

Name of Employer Occupation
Oceanstate Financial Registered Representative-Financial Ad

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: 8866303

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Rasikaran G. Boaz

Mailing Address 7 Kaiser Ct.

City State Zip Code
Morganville NJ 07751-4282

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

Name of Employer Occupation
AXA Advisors, LLC Financial Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2009

Transaction ID: 8866319

Amount of Each Receipt this Period
24.00

SUBTOTAL of Receipts This Page (optional) ► 299.00

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 205 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Timothy J. Harrison

Mailing Address 129 Ginger Cove Rd.

City State Zip Code
Valley NE 68064

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

Name of Employer
Northwestern Mutual Financial Network

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: 8866365

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven Marc Dugal

Mailing Address 12238 E Millburn Ave

City State Zip Code
Baton Rouge LA 70815-6742

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

Name of Employer
Northwestern Mutual

Occupation
Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: 8866371

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Clifford P. Karthaus

Mailing Address 19407 Camden Ave

City State Zip Code
Elkhorn NE 68022-1124

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

Name of Employer
Principal Financial Group

Occupation
Regional Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: 8866381

Amount of Each Receipt this Period
250.00

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: PAGE 206 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866415
 Amount of Each Receipt this Period: 30.00

B.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866417
 Amount of Each Receipt this Period: 120.00

C.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866419
 Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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 207 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866425
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866433
 Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866435
 Amount of Each Receipt this Period: 69.00

SUBTOTAL of Receipts This Page (optional) ► 229.00

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 208 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City State Zip Code
Falls Church WA 22042

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

Name of Employer Occupation
NAIFA Deputy CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 454.00

Date of Receipt

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

Transaction ID: 8866439

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert F. Decker

Mailing Address 9290 West Dodge Road #102

City State Zip Code
Omaha NE 68114-3320

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

Name of Employer Occupation
John Hancock Life Ins. Brokerage Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1315.00

Date of Receipt

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

Transaction ID: 8866449

Amount of Each Receipt this Period
65.00

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas G. Lipscomb, III

Mailing Address 10813 W. 141 St

City State Zip Code
Shawnee Mission KS 66221-8084

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

Name of Employer Occupation
Northwestern Mutual Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

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

Transaction ID: 8866463

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional)

715.00

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 209 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Richard A. Strevey
Mailing Address 15311 Bemis Street
City State Zip Code
Omaha NE 68154-1882
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Strevey Financial Services OWNER
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9
Transaction ID: 8866477
Amount of Each Receipt this Period
187.50

B. Full Name (Last, First, Middle Initial)
Mr. Robert F. Decker
Mailing Address 9290 West Dodge Road #102
City State Zip Code
Omaha NE 68114-3320
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
John Hancock Life Ins. Brokerage Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1375.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9
Transaction ID: 8866481
Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters
Mailing Address 2901 Telestar Ct
City State Zip Code
Falls Church WA 22042
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NAIFA Deputy CEO
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 479.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9
Transaction ID: 8866497
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 272.50
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 210 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Steve H. Holter

Mailing Address 1934 Carlyle Pl

City State Zip Code
Arlington Heights IL 60004-3308

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

Name of Employer Occupation
The Holter Financial Group Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866545

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City State Zip Code
Falls Church WA 22042

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

Name of Employer Occupation
NAIFA Deputy CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 529.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866557

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. John L. Hepworth

Mailing Address 3052 Hillcrest LNWay

City State Zip Code
Boise ID 83705

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

Name of Employer Occupation
Northwestern Mutual Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 8866603

Amount of Each Receipt this Period
300.00

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 211 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City State Zip Code
Falls Church WA 22042

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

Name of Employer Occupation
NAIFA Deputy CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 554.00

Date of Receipt

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

Transaction ID: 8866611

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City State Zip Code
Falls Church WA 22042

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

Name of Employer Occupation
NAIFA Deputy CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 604.00

Date of Receipt

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

Transaction ID: 8866613

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City State Zip Code
Falls Church WA 22042

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

Name of Employer Occupation
NAIFA Deputy CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 704.00

Date of Receipt

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

Transaction ID: 8866615

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 212 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 729.00

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866617
Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 766.50

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866619
Amount of Each Receipt this Period: 37.50

C.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 816.50

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866621
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 112.50

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 213 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Dr. Susan B. Waters	Date of Receipt MM / DD / YYYY 12 / 29 / 2009
	Mailing Address 2901 Telestar Ct	Transaction ID: 8866623
	City Falls Church State WA Zip Code 22042	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NAIFA Occupation Deputy CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 846.50	

B.	Full Name (Last, First, Middle Initial) Dr. Susan B. Waters	Date of Receipt MM / DD / YYYY 12 / 29 / 2009
	Mailing Address 2901 Telestar Ct	Transaction ID: 8866625
	City Falls Church State WA Zip Code 22042	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NAIFA Occupation Deputy CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 896.50	

C.	Full Name (Last, First, Middle Initial) Mr. George B. Rosenthal	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 1306 Brook View Circle	Transaction ID: 8866649
	City Marlton State NJ Zip Code 08053-1656	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer George B. Rosenthal Financial Services Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	200.00
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 214 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Robert H. Fitzsimmons

Mailing Address 6421 Shenandoah Dr

City Lincoln State NE Zip Code 68510-4152

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

Name of Employer Bob Fitzsimmons, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: 12 / 28 / 2009
Transaction ID: 8866663
Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 932.50

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866673
Amount of Each Receipt this Period: 36.00

C. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 982.50

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866675
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 211.00

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 215 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1057.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866755

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1082.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866757

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1107.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866759

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 216 / 234
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Dr. Susan B. Waters		Date of Receipt
	Mailing Address 2901 Telestar Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Falls Church	WA	22042
	FEC ID number of contributing federal political committee. C		Transaction ID: 8866805
Name of Employer NAIFA		Occupation Deputy CEO	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 ▼ 1132.50	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Dr. Susan B. Waters		Date of Receipt
	Mailing Address 2901 Telestar Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Falls Church	WA	22042
	FEC ID number of contributing federal political committee. C		Transaction ID: 8866829
Name of Employer NAIFA		Occupation Deputy CEO	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 ▼ 1157.50	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Dr. Susan B. Waters		Date of Receipt
	Mailing Address 2901 Telestar Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Falls Church	WA	22042
	FEC ID number of contributing federal political committee. C		Transaction ID: 8866831
Name of Employer NAIFA		Occupation Deputy CEO	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 ▼ 1182.50	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
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 217 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.50

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866837
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Earl H. Jarnigan

Mailing Address 631 Morrell Springs Rd.

City Newport State TN Zip Code 37821-8855

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

Name of Employer Tennessee Farmers Life Ins Occupation Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 12 / 30 / 2009
Transaction ID: 8866839
Amount of Each Receipt this Period: 325.00

C. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1257.50

Date of Receipt: 12 / 29 / 2009
Transaction ID: 8866861
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 218 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1282.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866863

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Dr. Susan B. Waters

Mailing Address 2901 Telestar Ct

City Falls Church State WA Zip Code 22042

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

Name of Employer NAIFA Occupation Deputy CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1307.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 8866865

Amount of Each Receipt this Period
25.00

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 Nationwide Insurance 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
1 2 / 3 0 / 2 0 0 9

Transaction ID: 8866881

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► 175.00

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 219 / 234
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Mary C. Castiglione
Mailing Address 33 Muirfield Ct.
City State Zip Code
Dover DE 19904
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Insurance Assoc. Occupation AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 30 / 2009
Transaction ID: 8866893
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Timothy A. Toland
Mailing Address 4427 Talmadge Rd.
City State Zip Code
Toledo OH 43623-3515
FEC ID number of contributing federal political committee. **C**
Name of Employer Savage & Associates, Inc. Occupation Senior Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 30 / 2009
Transaction ID: 8866897
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. David L. Halvorson
Mailing Address P O Box 181
City State Zip Code
Fargo ND 58107-0181
FEC ID number of contributing federal political committee. **C**
Name of Employer Halvorson Company, Inc. Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 12 / 31 / 2009
Transaction ID: 8866921
Amount of Each Receipt this Period 450.00

SUBTOTAL of Receipts This Page (optional) ► 950.00
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 220 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

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 NAIFA Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1304.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: 8866925

Amount of Each Receipt this Period 52.25

B.

Full Name (Last, First, Middle Initial)
Mr. Donald Allan Brown

Mailing Address 6675 S.W. 90 Court

City Miami State FL Zip Code 33173

FEC ID number of contributing federal political committee. C

Name of Employer Brown & Associates Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: 8866927

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Donald Allan Brown

Mailing Address 6675 S.W. 90 Court

City Miami State FL Zip Code 33173

FEC ID number of contributing federal political committee. C

Name of Employer Brown & Associates Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: 8866929

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 127.25

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 221 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Donald Allan Brown

Mailing Address 6675 S.W. 90 Court

City State Zip Code
Miami FL 33173

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

Name of Employer Occupation
Brown & Associates AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: 8866931

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Paul G. Krasnow

Mailing Address 9454 Wilshire Blvd #310

City State Zip Code
Beverly Hills CA 90212-2904

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

Name of Employer Occupation
Northwestern Mutual AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: 8866947

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Wolfe

Mailing Address 555 Saddle Mountain Road

City State Zip Code
Colorado Springs CO 80919-2031

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

Name of Employer Occupation
AXA Advisors Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: 8866973

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 222 / 234
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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 Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Mark A. Mendenhall

Mailing Address 1121 Custer Court

City State Zip Code
North Platte NE 69101-6305

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

Name of Employer Farm Bureau Financial Services
Occupation Financial Professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 8867021

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Edwin T. Demeritte

Mailing Address 5301 N.W. 18 Avenue

City State Zip Code
Miami FL 33142-3707

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

Name of Employer Allianz Life Insurance Co.
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 8867049

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jay C. Matthews

Mailing Address 4107 17th St S

City State Zip Code
Fargo ND 58104-6355

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

Name of Employer Producers Financial Group
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 8867057

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ► **640.00**

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 223 / 234
(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Mary H. Potter

Mailing Address 207 Leland

City Waterloo State IA Zip Code 50701

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

Name of Employer New York Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 928.20

Date of Receipt: 12 / 31 / 2009
Transaction ID: 8867059
 Amount of Each Receipt this Period: 861.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert A. Phares

Mailing Address 608 Sequoia Court

City North Platte State NE Zip Code 69101-5959

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

Name of Employer Phares Financial Services Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: 8867077
 Amount of Each Receipt this Period: 150.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert S. Neale

Mailing Address 936 Van Buren St

City Hollywood State FL Zip Code 33019-1637

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

Name of Employer Par-Di Services ,Inc Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: 8867079
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **1261.00**

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 224 / 234

(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. David A. Beaty

Mailing Address Thunder Ridge Mall- Lower West
2302 W 1st St, Suite 120

City Cedar Falls State IA Zip Code 50613

FEC ID number of contributing federal political committee. C

Name of Employer Heartland Financial Services Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 8867089

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Mark J. Funk

Mailing Address 5103 Mercedes Bend

City Waterloo State IA Zip Code 50701

FEC ID number of contributing federal political committee. C

Name of Employer Northwestern Mutual Financial Network Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 8867127

Amount of Each Receipt this Period 150.00

C.

Full Name (Last, First, Middle Initial)
Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City Washington State VA Zip Code 20001-5006

FEC ID number of contributing federal political committee. C

Name of Employer NAIFA Occupation Sr VP Law & Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 572.85

Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 8867173

Amount of Each Receipt this Period 31.25

SUBTOTAL of Receipts This Page (optional) 211.25

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 225 / 234
	<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 Comm

A.	Full Name (Last, First, Middle Initial) Ms. Jill Edwards	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 2901 Telestar Court	Transaction ID: 8867201
	City Falls Church State VA Zip Code 22042-1260	Amount of Each Receipt this Period 20.83
	FEC ID number of contributing federal political committee. C	
	Name of Employer NAIFA Occupation Director of Federal Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 346.45	

B.	Full Name (Last, First, Middle Initial) Mr. R. Keith Fulton	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 866 Harbor Hill Dr	Transaction ID: 8867233
	City Safety Harbor State FL Zip Code 34695-4168	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fulton Insurance Group, Inc. Occupation President 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) Ms. Gloria G. Jones	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 9
	Mailing Address 11400 SW Dawns Ct P O Box 23693	Transaction ID: 8980188
	City Portland State OR Zip Code 97281-3693	Amount of Each Receipt this Period 0.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MetLife Occupation Financial Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$0.-00

SUBTOTAL of Receipts This Page (optional)	270.83
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 226 / 234	
	(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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Ms Jennifer L Gool		Date of Receipt																					
	Mailing Address P O Box 1061		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	7		2	0	9															
	City State Zip Code O'Fallon IL 62269-8061		Transaction ID: 8980189																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00																					
Name of Employer The Mark Vandiver Agency		Occupation Licensed Agent																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.50																						
		[MEMO ITEM] Refund(s) on Schedule B Totaling \$17.00 This changes the YTD Total to \$25.-50																						

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	50921.38

**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 Comm

A. Full Name (Last, First, Middle Initial)
Neugebauer Congressional Committee

Mailing Address PO Box 54175

City Lubbock State TX Zip Code 79453

Purpose of Disbursement 011 Category/Type

Candidate Name Rep. Robert R. Neugebauer

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: TX District: 19

Transaction ID: 8752058
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Demint For Senate Committee Inc

Mailing Address PO Box 12425

City Columbia State SC Zip Code 29211

Purpose of Disbursement 011 Category/Type

Candidate Name Sen. James W. DeMint

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: SC District:

Transaction ID: 8752059
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Friends Of Chris Dodd

Mailing Address PO Box 270701

City West Hartford State CT Zip Code 06127

Purpose of Disbursement 011 Category/Type

Candidate Name Sen. Christopher J. Dodd

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: CT District:

Transaction ID: 8752060
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 228 / 234

<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 Comm

A.	Full Name (Last, First, Middle Initial) Hastings for Congress Comm.	Transaction ID: 8752061 Date of Disbursement 12 / 02 / 2009
	Mailing Address P.O. Box 2926	Amount of Each Disbursement this Period 1000.00
	City Pasco State WA Zip Code 99302	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Richard Hastings	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of John Tanner	Transaction ID: 8776934 Date of Disbursement 12 / 07 / 2009
	Mailing Address Post Office Box 1994	Amount of Each Disbursement this Period -2500.00
	City Union City State TN Zip Code 38281	
	Purpose of Disbursement Void - Friends Of John Tanner	011 Category/ Type
	Candidate Name Rep. John S. Tanner	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chris Lee For Congress	Transaction ID: 8777223 Date of Disbursement 12 / 08 / 2009
	Mailing Address PO Box 15395	Amount of Each Disbursement this Period 2000.00
	City Rochester State NY Zip Code 14615	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Christopher John Lee	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Stephanie Herseth Sandlin For South Dakota</p> <p>Mailing Address PO Box 2009</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Stephanie Herseth Sandlin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 01</p>	<p>Transaction ID: 8777224 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Donald Manzullo for Congress</p> <p>Mailing Address PO Box 7783</p> <p>City Rockford State IL Zip Code 61126</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Donald Manzullo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 16</p>	<p>Transaction ID: 8777225 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Patrick Murphy For Congress</p> <p>Mailing Address P.O. Box 868</p> <p>City Levittown State PA Zip Code 19058</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Patrick Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 08</p>	<p>Transaction ID: 8783005 Date of Disbursement 12 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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 230 / 234

<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 Comm

A.	Full Name (Last, First, Middle Initial) Joe Wilson For Congress Committee	Transaction ID: 8787132 Date of Disbursement																			
	Mailing Address Post Office Box 2145	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	9												
	City West Columbia State SC Zip Code 29171	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Joe Wilson	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Rangel for Congress Committee	Transaction ID: 8787139 Date of Disbursement																			
	Mailing Address PO Box 5577 - Manhattanville Stati	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	9												
	City New York State NY Zip Code 10027	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00																		
1500.00																					
	Candidate Name Charles Rangel	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Neugebauer Congressional Committee	Transaction ID: 8811927 Date of Disbursement																			
	Mailing Address PO Box 54175	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	9												
	City Lubbock State TX Zip Code 79453	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Robert R. Neugebauer	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 19	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3500.00</td></tr></table>	3500.00
3500.00		
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)

PAGE 231 / 234

<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 Comm

<p>A. Full Name (Last, First, Middle Initial) Shelby For U S Senate</p> <p>Mailing Address Post Office Box 1091</p> <p>City Tuscaloosa State AL Zip Code 35403</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Sen. Richard C. Shelby</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:</p>	<p>Transaction ID: 8811928 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mel Watt For Congress Committee</p> <p>Mailing Address PO Box 36831</p> <p>City Charlotte State NC Zip Code 28236</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Melvin L. Watt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 12</p>	<p>Transaction ID: 8811930 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Virginia Foxx For Congress</p> <p>Mailing Address P.O. Box 1100</p> <p>City Clemmons State NC Zip Code 27012</p> <p>Purpose of Disbursement Void - Virginia Foxx For Congress 011 Category/Type</p> <p>Candidate Name Rep. Virginia Foxx</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 05</p>	<p>Transaction ID: 8815458 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>Void - Virginia Foxx For Congress</p>

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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 232 / 234

<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 Comm

A.

Full Name (Last, First, Middle Initial)

Virginia Foxx For Congress

Mailing Address P.O. Box 1100

City Clemmons State NC Zip Code 27012

Purpose of Disbursement

Candidate Name
Rep. Virginia Foxx

Office Sought: House
 Senate
 President

State: NC District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 8815459

Date of Disbursement

12 / 28 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

16500.00

**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 233 / 234

<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 Comm

A.

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address P.O. box 40031

City
Roanoke

State
VA

Zip Code
24022-0031

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 8890263

Date of Disbursement

/ /

Amount of Each Disbursement this Period

bank fees

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 234 / 234
	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 Comm

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Association of Insurance and Financial Advisors Political Action Comm	Nature of Debt (Purpose): Payroll, benefits, Supplies, Copies					
Mailing Address 2901 Telestar Ct						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Falls Church</td> <td>VA</td> <td>22042</td> </tr> </table>		City	State	ZIP Code	Falls Church	VA
City	State	ZIP Code				
Falls Church	VA	22042				

Outstanding Balance Beginning This Period		Transaction ID: 8980190
33451.76		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
15231.98	0.00	48683.74

1) SUBTOTALS This Period This Page (optional).....	▶	48683.74
2) TOTALS This Period (last page this line number only).....	▶	48683.74
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)	▶	48683.74