

# 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  
CAMPAIGN FOR AMERICAS FUTURE

ADDRESS (number and street) 175 S. WEST TEMPLE, SUITE 650  
 Check if different than previously reported. (ACC)  
SALT LAKE CITY UT 84101

2. **FEC IDENTIFICATION NUMBER** C00235572  
**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 09 01 2006 through 09 30 2006

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

Type or Print Name of Treasurer STANLEY R. DE WAAL

Signature of Treasurer Electronically Filed by STANLEY R. DE WAAL Date 10 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CAMPAIGN FOR AMERICAS FUTURE

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		27896.86
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	11557.29									
(c) Total Receipts (from Line 19) .....	117700.00	262700.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	129257.29	290596.86								
7. Total Disbursements (from Line 31) .....	30409.58	191749.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	98847.71	98847.71								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
CAMPAIGN FOR AMERICAS FUTURE

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	40700.00	116500.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	40700.00	116500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	32000.00	101200.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	72700.00	217700.00
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 .....	45000.00	45000.00
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)) .....	117700.00	262700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	117700.00	262700.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	4409.58	18909.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4409.58	18909.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	157500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	1000.00	15340.00
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))..	30409.58	191749.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	30409.58	191749.15

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	72700.00	217700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	72700.00	217700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4409.58	18909.15
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4409.58	18909.15

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)  
CAMPAIGN FOR AMERICAS FUTURE

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

Mailing Address 1250 H STREET, NW, SUITE 555

City WASHINGTON State DC Zip Code 20005-3695

FEC ID number of contributing federal political committee. **C** C00346346

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1616

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
DIRECT SUPPLY INC. PARTNERS PAC

Mailing Address 6767 N. INDUSTRIAL ROAD

City MILWAUKEE State WI Zip Code 53223

FEC ID number of contributing federal political committee. **C** C00409516

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 23 / 2006

Transaction ID: 61017.C1612

Amount of Each Receipt this Period  
1500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
FANNIE MAE PAC

Mailing Address 3900 WISCONSIN AVENUE, NW

City WASHINGTON State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00393520

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 23 / 2006

Transaction ID: 61017.C1609

Amount of Each Receipt this Period  
2500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. FMR CORP PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 12 / 2006	
Mailing Address 82 DEVONSHIRE STREET		<b>Transaction ID: 60915.C1604</b>	
City State Zip Code BOSTON MA 02109	Amount of Each Receipt this Period 4000.00		
FEC ID number of contributing federal political committee. <b>C C00380550</b>		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 4000.00		

Full Name (Last, First, Middle Initial) <b>B. KINDRED HEALTHCARE INC. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 680 SOUTH 4TH STREET		<b>Transaction ID: 61017.C1631</b>	
City State Zip Code LOUISVILLE KY 40202-2407	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00242271</b>		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. LA HEALTH CARE GRP EMP FED PAC, INC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 420 W. PINHOOK, SUITE A		<b>Transaction ID: 61017.C1619</b>	
City State Zip Code LAFAYETTE LA 70503	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C C00382796</b>		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	9500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty field)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. NEW YORK LIFE PAC - NYLPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 23 / 2006	
Mailing Address 51 MADISON AVENUE		<b>Transaction ID: 61017.C1613</b>	
City State Zip Code NEW YORK NY 10010	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00158881</b>	Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. NEW YORK LIFE PAC - NYLPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 51 MADISON AVENUE		<b>Transaction ID: 61017.C1618</b>	
City State Zip Code NEW YORK NY 10010	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00158881</b>	Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. PFIZER PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006	
Mailing Address 235 EAST 42ND STREET		<b>Transaction ID: 61017.C1622</b>	
City State Zip Code NEW YORK NY 10017	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00016683</b>	Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. SCHERING - PLOUGH BETTER GOVERNMENT PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address 1 GIRALDA FARMS		<b>Transaction ID:</b> 60920.C1607
City MADISON State NJ Zip Code 07940	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00108290	Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. THE HARTFORD ADVOCATES FUND</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 3 / 2 0 0 6
Mailing Address HARTFORD PLAZA		<b>Transaction ID:</b> 61017.C1611
City HARTFORD State CT Zip Code 06115	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00168864	Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. THE HOME DEPOT INC. PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 101 CONSTITUTION AVE, NW, STE 800W		<b>Transaction ID:</b> 61017.C1617
City WASHINGTON State DC Zip Code 20001	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00284885	Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>9500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>32000.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 20
	(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)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. JOAQUIN BOLIVAR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address TARTAK 2		<b>Transaction ID: 61017.C1623</b>	
City TRUJILLO ALTO	State PR	Zip Code 00976	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer WATERCLUB HOTEL	Occupation INVESTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. PATRICK M. BYRNE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address 700 BITNER ROAD		<b>Transaction ID: 60915.C1603</b>	
City PARK CITY	State UT	Zip Code 84098	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer OVERSTOCK.COM	Occupation C.E.O.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. MANUEL CAO</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address c/o MIRIAM VALERO		<b>Transaction ID: 61017.C1625</b>	
City SAN JUAN	State PR	Zip Code 00926	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. ERNESTINA CARRO</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address DC1-2 MANSIONES DE VILLANOVA		Transaction ID: 61017.C1624
City SAN JUAN	State PR	Zip Code 00926
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer P & B, INC.	Occupation COMPROLLER	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID W. CROSS</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 1073 GRANVILLE DRIVE		Transaction ID: 61017.C1628
City NEWPORT BEACH	State CA	Zip Code 92660-6250
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer SELECT MEDICAL GROUP	Occupation C. D. O.	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL DRURY</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 26 / 2006
Mailing Address P. O. BOX 711547		Transaction ID: 61017.C1614
City SALT LAKE CITY	State UT	Zip Code 84171
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 900.00
Name of Employer UNITED BUSINESS BROKERS	Occupation BUSINESS BROKER	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 20
	<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)  
CAMPAIGN FOR AMERICAS FUTURE

**A.** Full Name (Last, First, Middle Initial)  
S. F. ECCLES

Mailing Address P. O. BOX 3028

City State Zip Code  
SALT LAKE CITY UT 84110-3028

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

Name of Employer Occupation  
SUNMARK CAPITAL CORP. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
3800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: 61017.C1615

Amount of Each Receipt this Period  
3800.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
ANDRES GUILLEMARD

Mailing Address URB LA VILLA DE TORRIMAR  
465 CALLE REY LUIS

City State Zip Code  
GUAYNABO PR 00969-3170

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

Name of Employer Occupation  
SELF EMPLOYED INSURANCE BROKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1626

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
STACEY HUGHES

Mailing Address 314 N. GARFIELD STREET

City State Zip Code  
ARLINGTON VA 22201-1231

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 16 / 2006

Transaction ID: 60920.C1606

Amount of Each Receipt this Period  
2000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 20
	<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)  
CAMPAIGN FOR AMERICAS FUTURE

**A.** Full Name (Last, First, Middle Initial)  
J. ROD LAUGHLIN

Mailing Address 2005 WESTBOURNE WAY

City State Zip Code  
ALPHARETTA GA 30022

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

Name of Employer Occupation  
REGENCY HOSPITAL CO. PRESIDENT & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1620

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
LAWRENCE LEDER

Mailing Address 929 CLINT MOORE ROAD

City State Zip Code  
BOCA RATON FL 33487

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

Name of Employer Occupation  
PROMISE HEALTH CARE C.F.O.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1621

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
JOHN H. MORGAN

Mailing Address 175 S. MAIN STREET, SUITE 900

City State Zip Code  
SALT LAKE CITY UT 84111

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

Name of Employer Occupation  
MORGAN GAS & OIL CO. SELF-EMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: 60920.C1608

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 20
	<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)  
CAMPAIGN FOR AMERICAS FUTURE

**A.** Full Name (Last, First, Middle Initial)  
MARIA C. MUNOZ MORAN

Mailing Address P. O. BOX 6254

City State Zip Code  
SAN JUAN PR 00914-6254

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1627

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
ROBERT A. ORTENZIO

Mailing Address 4716 OLD GETTYSBURG

City State Zip Code  
MECHANICSBURG PA 17055

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

Name of Employer Information Requested Occupation Information Requested

SELECT MEDICAL GROUP C.E.O.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1630

Amount of Each Receipt this Period  
2000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
ROCCO A. ORTENZIO

Mailing Address 7 WESTWIND DRIVE

City State Zip Code  
LEMOYNE PA 17043

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

Name of Employer Information Requested Occupation Information Requested

SELECT MEDICAL GROUP EXECUTIVE CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61017.C1629

Amount of Each Receipt this Period  
2000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR AMERICAS FUTURE

**A.** Full Name (Last, First, Middle Initial)  
MENLO F. SMITH

Mailing Address 635 MARYVILLE CENTRE #105

City SAINT LOUIS State MO Zip Code 63141

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

Name of Employer SUNMARK CAPITAL CORP. Occupation CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	6

Transaction ID: 61017.C1610

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	40700.00

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

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

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR AMERICAS FUTURE

**A.** Full Name (Last, First, Middle Initial)  
UTAH REPUBLICAN PARTY

Mailing Address 117 EAST SOUTH TEMPLE

City State Zip Code  
SALT LAKE CITY UT 84111-

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: 60915.C1605

Amount of Each Receipt this Period  
45000.00

Refund of Contribution Made

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	45000.00

**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 17 / 20

<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)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. CBIZ FPG, LLC</b>		Transaction ID: 61017.E1563 Date of Disbursement MM / DD / YYYY 09 / 14 / 2006	
Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650		Amount of Each Disbursement this Period 378.08	
City SALT LAKE CITY State UT Zip Code 84101-	Purpose of Disbursement ACCOUNTING FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		ACCOUNTING FEES

Full Name (Last, First, Middle Initial) <b>B. NATIONAL POLITICAL ASSOCIATES</b>		Transaction ID: 61017.E1569 Date of Disbursement MM / DD / YYYY 09 / 21 / 2006	
Mailing Address P.O. BOX 2204		Amount of Each Disbursement this Period 4000.00	
City WASHINGTON State DC Zip Code 20013-	Purpose of Disbursement FUNDRAISING CONSULTING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial) <b>C. ZIONS BANK</b>		Transaction ID: 61017.E1570 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006	
Mailing Address 310 SOUTH MAIN STREET		Amount of Each Disbursement this Period 31.50	
City SALT LAKE CITY State UT Zip Code 84101-	Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		MERCHANT FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4409.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	4409.58

# 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 18 / 20

<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)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial) <b>A. Congressman Joe Barton Committee</b>		<b>Transaction ID: 61017.E1565</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address PO BOX 1444		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION TO GENERAL
City ENNIS State TX Zip Code 75120-	Purpose of Disbursement CONTRIBUTION TO GENERAL Candidate Name JOE LINUS BARTON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. BISHOP FOR CONGRESS</b>		<b>Transaction ID: 61017.E1562</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 74 N. 300 E.		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION TO GENERAL
City BRIGHAM CITY State UT Zip Code 84302-	Purpose of Disbursement CONTRIBUTION TO GENERAL Candidate Name ROBERT WILLIAM BISHOP Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Congressman John Doolittle</b>		<b>Transaction ID: 61017.E1564</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 10531 Mereworth Lane		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION TO GENERAL
City OAKTON State VA Zip Code 22124-	Purpose of Disbursement CONTRIBUTION TO GENERAL Candidate Name JOHN T DOOLITTLE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 20

<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)  
CAMPAIGN FOR AMERICAS FUTURE

**A.** Full Name (Last, First, Middle Initial)  
Jon Kyl For U.S. Senate

Mailing Address P. O. BOX 10246

City PHOENIX State AZ Zip Code 85064-

Purpose of Disbursement  
CONTRIBUTION TO GENERAL

Candidate Name  
JON L KYL

Office Sought:  House  Senate  President  
State: AZ District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: 61017.E1566

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

CONTRIBUTION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
Mike Dewine For US Senate

Mailing Address PO BOX 340188

City COLUMBUS State OH Zip Code 43234-

Purpose of Disbursement  
CONTRIBUTION TO GENERAL

Candidate Name  
RICHARD MICHAEL DEWINE

Office Sought:  House  Senate  President  
State: OH District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: 61017.E1567

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

CONTRIBUTION TO GENERAL

**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 20 / 20

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

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR AMERICAS FUTURE

Full Name (Last, First, Middle Initial)

**A.** NATIONAL FEDERATION OF REPUBLICAN WOMEN

Mailing Address 124 N. ALFRED STREET

City ALEXANDRIA State VA Zip Code 22314-

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 61017.E1568

Date of Disbursement

/   /

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) .....

1000.00