

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

Title Industry Political Action Committee

ADDRESS (number and street) 1828 L St NW
Suite 705
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00012914

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:
- | | | | |
|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input checked="" type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 09 01 2010 through 09 30 2010

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

Type or Print Name of Treasurer Justin B. Ailes

Signature of Treasurer Electronically Filed by Justin B. Ailes Date 10 13 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
Title Industry Political Action Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 1 | 0 | | 235550.32 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 1 | 0 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 230866.48 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 19355.31 | 201331.15 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 250221.79 | 436881.47 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 70930.13 | 257589.81 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 179291.66 | 179291.66 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Title Industry Political Action Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| 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) | 16337.22 | 181163.38 |
| (ii) Unitemized | 3005.00 | 17550.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 19342.22 | 198713.38 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 1000.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 19342.22 | 199713.38 |
| 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 | 1500.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 13.09 | 117.77 |
| 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)) | 19355.31 | 201331.15 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 19355.31 | 201331.15 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 180.13 | 3489.81 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 180.13 | 3489.81 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 70750.00 | 254100.00 |
| 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..... | 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)).. | 70930.13 | 257589.81 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 70930.13 | 257589.81 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

| 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) | 19342.22 | 199713.38 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 19342.22 | 199713.38 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 180.13 | 3489.81 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 180.13 | 3489.81 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 34

(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)
Title Industry Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dennis C. Anderson

Mailing Address 1104 E Plum Creek Rd

City State Zip Code
Sioux Falls SD 57105

FEC ID number of contributing federal political committee. C

Name of Employer First Dakota Title Occupation General Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 22 / 2010

Transaction ID: AAA08F15CC5F54CE9895

Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Kathy J Austen

Mailing Address 1818 Estate Lane

City State Zip Code
Northfield MN 55057-3212

FEC ID number of contributing federal political committee. C

Name of Employer Fidelity National Title Group Occupation Agency Mgr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 10 / 2010

Transaction ID: A169F2B17E1DB445A90B

Amount of Each Receipt this Period 750.00

C. Full Name (Last, First, Middle Initial)
Mr. Gregory A. Booth

Mailing Address 25 Evergreen Rd

City State Zip Code
North Oaks MN 55127

FEC ID number of contributing federal political committee. C

Name of Employer Land Title, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 10 / 2010

Transaction ID: A7F43858B52504DE5A70

Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) 1450.00

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 7 / 34 |
| | <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)
Title Industry Political Action Committee

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Craig L. Burns | Date of Receipt MM / DD / YYYY 09 / 15 / 2010 |
| | Mailing Address 15 E Stonebridge Cir | Transaction ID: A4D5B77EE64BD4967BB0 |
| | City State Zip Code Wichita KS 67230-1560 | Amount of Each Receipt this Period 1050.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Security 1st Title Occupation CEO 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) Chris Condie | Date of Receipt MM / DD / YYYY 09 / 02 / 2010 |
| | Mailing Address 718 Huntington PI | Transaction ID: AFD73A0D7DDAD40D1AB7 |
| | City State Zip Code Littleton CO 80126 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer ATGF Company Occupation CEO 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) Edward Cronin | Date of Receipt MM / DD / YYYY 09 / 22 / 2010 |
| | Mailing Address 4780 W Moncrieff Place | Transaction ID: AF2E19795E78C4DFA96C |
| | City State Zip Code Denver CO 80212-1604 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Capital Title LLC Occupation Title Examiner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1550.00 |
| 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 8 / 34 |
| | <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)
Title Industry Political Action Committee

| | | | |
|---|---|------------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Mike Currier | | Date of Receipt |
| | Mailing Address 1517 Vineyard Ct | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 02 / 2010 |
| | City | State | Zip Code |
| | Carlsbad | NM | 88220 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: A8FBA754C7ADE47D5B46 |
| Name of Employer Guaranty Title Company | | Occupation President | 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 ▼ 450.00 | <input type="text"/> 350.00 |

| | | | |
|---|---|------------------------------------|--|
| B. | Full Name (Last, First, Middle Initial) James M. Czapiga | | Date of Receipt |
| | Mailing Address 68 Knollwood Dr | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010 |
| | City | State | Zip Code |
| | Hebron | CT | 06248-1280 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: AAA81825341634DEAAA9 |
| Name of Employer First American Title Insurance Co. | | Occupation V.P. | 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 ▼ 375.00 | <input type="text"/> 125.00 |

| | | | |
|---|---|------------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Jeffrey Danielson | | Date of Receipt |
| | Mailing Address 305 SW 5th St. | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010 |
| | City | State | Zip Code |
| | Willmar | MN | 56201-3213 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: AA267A7538C2344BA961 |
| Name of Employer Kandiyohi County Abstract & Title Comp | | Occupation President | 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 ▼ 250.00 | <input type="text"/> 250.00 |

| | |
|--|---------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 725.00 |
| 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 9 / 34
(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)
Title Industry Political Action Committee

A. Full Name (Last, First, Middle Initial)
Pamela P. Day

Mailing Address 4824 Morrison Rd

City Richmond State VA Zip Code 23230

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

Name of Employer Day Title Services, L.C. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3125.00

Date of Receipt 09 / 10 / 2010

Transaction ID: AAD789F4C697B4CC5A1E

Amount of Each Receipt this Period 625.00

B. Full Name (Last, First, Middle Initial)
Brian Gartley

Mailing Address 334 High Street

City Morgantown State WV Zip Code 26505-5502

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

Name of Employer Old Republic National Title Occupation V.P.-Agency Mktg. Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 02 / 2010

Transaction ID: AA098AC117EA64C93BD8

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mark Goodman

Mailing Address 2370 Harvest Way

City Chanhassen State MN Zip Code 55317

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

Name of Employer Commercial Partners Title Occupation V.P.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2010

Transaction ID: AC5615BDACED14FD8974

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1375.00

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 10 / 34
(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)
Title Industry Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Peter J. Griffiths

Mailing Address 7824 S Espana Way

City State Zip Code
Centennial CO 80016

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

Name of Employer Land Title Guarantee Company
Occupation V.P. & Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2010

Transaction ID: AE5045A4D239742CA892

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Karen Johner

Mailing Address 547 Marilyn Drive

City State Zip Code
Mandan ND 58554

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

Name of Employer The Mandan Title Company
Occupation Vice President/Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: A7C88B9FB97114FA0B7B

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
William P. Kahalley

Mailing Address 5909 Airport Blvd.

City State Zip Code
Mobile AL 36608-3140

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

Name of Employer Surety Land Title, Inc.
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2010

Transaction ID: AD560E3F0E2C0434C8AD

Amount of Each Receipt this Period
1000.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 34 |
| | <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)
Title Industry Political Action Committee

| | | | | | |
|---|---|--------------------------------------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Mr. Brandt Keefe | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 8419 Morris Ave S | | Transaction ID: AC554432F6E314B25828 | | |
| | City Minneapolis | State MN | Zip Code 55437-1364 | Amount of Each Receipt this Period 250.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Stewart Title Guaranty | Occupation V.P./State Agency Mgr. | | | |
| 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) Gregory M. Kosin | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 156 N Montclair Ave | | Transaction ID: A64C08C4E99DD40DEB84 | | |
| | City Glen Ellyn | State IL | Zip Code 60137 | Amount of Each Receipt this Period 200.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Greater Illinois Title Company | Occupation President | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1400.00 | | | |

| | | | | | |
|---|---|------------------------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Brent Laliberte | | Date of Receipt MM / DD / YYYY 09 / 02 / 2010 | | |
| | Mailing Address 120 Bedford Ct. | | Transaction ID: AAB22B0369CEB4195829 | | |
| | City Belle Chasse | State LA | Zip Code 70037 | Amount of Each Receipt this Period 350.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Bayou Title, Inc. | Occupation President/Attorney | | | |
| 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) | ▶ | 800.00 |
| 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 12 / 34 |
| | <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)
Title Industry Political Action Committee

A. Full Name (Last, First, Middle Initial)
Arlana L. Langner

Mailing Address 803 S Darling Ln NW

City Alexandria State MN Zip Code 56308

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

Name of Employer Douglas County Abstract Co. Occupation Examiner/Closer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2010

Transaction ID: A21667D58A4AE4F2EB9B

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Paul R. Langner

Mailing Address 10077 Cherry Point Rd SW

City Alexandria State MN Zip Code 56308-4573

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

Name of Employer Douglas County Abstract Occupation Vice - President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2010

Transaction ID: A35F99B92F6E8430CA70

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Linda Larson

Mailing Address 1238 Berkeley Ave

City Saint Paul State MN Zip Code 55105

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

Name of Employer Old Republic National Title Insurance Occupation V.P.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 10 / 2010

Transaction ID: AC4E5F00F112C4DE89BE

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 13 / 34

(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)
Title Industry Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Andy Maloney

Mailing Address 807 Hillsboro Rd

City State Zip Code
Franklin TN 37064-2013

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Nashville Title Insurance Corp. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 09 / 10 / 2010

Transaction ID: A5DD0BE9A66E945EF8DE

Amount of Each Receipt this Period 240.00

B.

Full Name (Last, First, Middle Initial)
Daniel Mennenoh

Mailing Address 612 S Bench St

City State Zip Code
Galena IL 61036

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
H. B. Wilkinson Title Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2010

Transaction ID: A611B250455D446F0906

Amount of Each Receipt this Period 350.00

C.

Full Name (Last, First, Middle Initial)
John P. Micciche

Mailing Address 8840 Stanford Boulevard

City State Zip Code
Columbia MD 21045-5827

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Old Republic Title Co. Agency Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2010

Transaction ID: AEFD31865E1724B748CA

Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) 940.00

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 14 / 34 |
| | <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)
Title Industry Political Action Committee

| | | | | | |
|---|---|--------------------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Jim Milinkovich | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 706 Heritage Trail NE | | Transaction ID: A40ED595EBF184CEB904 | | |
| | City New Prague | State MN | Zip Code 56071-2096 | Amount of Each Receipt this Period 250.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer First Amercian Title Insurance Co. | Occupation V.P. | Aggregate Year-to-Date 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | | | | |
|---|---|-----------------------------------|---|--|--|
| B. | Full Name (Last, First, Middle Initial) Darlene M Missler | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 6640 - 229th Ave, NW | | Transaction ID: AD29F846F46A2431FA0B | | |
| | City Elk River | State MN | Zip Code 55330 | Amount of Each Receipt this Period 250.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer First American | Occupation State Services Mgr. | Aggregate Year-to-Date 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | | | | |
|---|---|-------------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Richard G. Mitchell, Jr. | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 1406 Tomy Street | | Transaction ID: A99D220AAAC434B3ABE1 | | |
| | City Miles City | State MT | Zip Code 59301-4325 | Amount of Each Receipt this Period 250.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Security Abstract & Title Co. | Occupation President | Aggregate Year-to-Date 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 34 |
| | <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)
Title Industry Political Action Committee

| | | | |
|---|---|-----------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Katheryn Nathan | | Date of Receipt |
| | Mailing Address 2925 Palmer Drive | | <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 09 / 22 / 2010 |
| | City | State | Zip Code |
| | Fremont | NE | 68025-2151 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: A6B5342897BFF4794873 |
| Name of Employer Dodge County Title & Escrow | | Occupation 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 ▼ | <input type="text"/> 250.00 |
| | | <input type="text"/> 250.00 | |

| | | | |
|---|---|-----------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Ms. Mary Pellegrini | | Date of Receipt |
| | Mailing Address 6821 North 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 09 / 22 / 2010 |
| | City | State | Zip Code |
| | Oak Park | IL | 60302-1042 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: AEE8300A4DED14C15878 |
| Name of Employer Prairie Title | | Occupation Co-Owner | 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"/> 350.00 |
| | | <input type="text"/> 350.00 | |

| | | | |
|---|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Rand E. Peterson | | Date of Receipt |
| | Mailing Address 1352 Ivanhoe Street | | <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 09 / 02 / 2010 |
| | City | State | Zip Code |
| | Denver | CO | 80220-2627 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: A8F9CAA0955E1410C982 |
| Name of Employer Land Title Gurantee Company | | Occupation Residential Title Manager | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 250.00 |
| | | <input type="text"/> 250.00 | |

| | |
|--|-----------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 850.00 |
| 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 16 / 34 |
| | <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)
Title Industry Political Action Committee

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Kurt Pfothenauer | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 |
| | Mailing Address 1828 L St NW #705 | Transaction ID: AEEC0BEEF7B914800B93 |
| | City State Zip Code Washington DC 20036-5107 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer American Land Title Association | Occupation CEO | |
| 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) Michael B. Pryor | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 |
| | Mailing Address 5625 Ridgefield Ln | Transaction ID: AD1E97A722EC544659C0 |
| | City State Zip Code Little Rock AR 72223-9293 | Amount of Each Receipt this Period 416.67 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Lenders Title Company | Occupation CEO/President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3750.03 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Joshua Reisetter | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 |
| | Mailing Address 1714 Orchard Dr | Transaction ID: A1368CD1C6E9E423FAF0 |
| | City State Zip Code Brookings SD 57006 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Dakota Abstract & Title Co. | Occupation Secy.-Treas. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1370.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1516.67 |
| 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 / 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Title Industry Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jody Schimek

Mailing Address 7091 Granlund Dr SW

City State Zip Code
Alexandria MN 56308-9412

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

Name of Employer Occupation
Alexandria Title Company Title Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2010

Transaction ID: A0AC545BBB5B94FE0B4A

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Esther Semlak

Mailing Address 4550 McDonald Dr.

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Burnet Title President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2010

Transaction ID: AA94D58A9B6634F74828

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
James Smyithe

Mailing Address PO Box 4

City State Zip Code
Clearbrook MN 56634

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

Name of Employer Occupation
Sathre Title & Abstract Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2010

Transaction ID: AF8DCBDC80A7F404BCF

Amount of Each Receipt this Period
500.00

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: (check only one) | PAGE 18 / 34 |
| | <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)
Title Industry Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Hayden B St. John

Mailing Address 5715 Sw 21st St.

City State Zip Code
Topeka KS 66604-3719

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

Name of Employer: Lawyers Title of Topeka, Inc.
Occupation: Chairman of the Board

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: A5405C7626E2E41E2819
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
David Townsend

Mailing Address 2020 Cobblestone Ct.

City State Zip Code
Columbia MO 65203-5845

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

Name of Employer: Agents National Title Insurance Co.
Occupation: C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 10 / 2010
Transaction ID: A923B7D4853CC4279BF0
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
John A. Voso, Jr.

Mailing Address 8749 Eaton Dr

City State Zip Code
Northfield OH 44067-3270

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

Name of Employer: Old Republic National Title Ins. Co.
Occupation: Senior V.P./Agency Relations Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1850.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A355B3FD705394DF8A4F
Amount of Each Receipt this Period: 350.00

SUBTOTAL of Receipts This Page (optional) ▶ 700.00

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 19 / 34 |
| | <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)
Title Industry Political Action Committee

| | | | | | |
|---|---|-------------------------------------|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Stephen C. Wilson | | Date of Receipt MM / DD / YYYY 09 / 13 / 2010 | | |
| | Mailing Address PO Box 294 | | Transaction ID: AB3FA8D4B72654053A32 | | |
| | City Topsfield | State MA | Zip Code 01983 | Amount of Each Receipt this Period 1000.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Old Republic National Title Insurance | | Occupation E.V.P. | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1000.00 | | | |

| | | | | | |
|---|---|-------------------------------------|---|--|--|
| B. | Full Name (Last, First, Middle Initial) Tony Winczewski | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 20920 Pin Oak Lane | | Transaction ID: AEF0D271F692E47C38AF | | |
| | City Prior Lake | State MN | Zip Code 55372 | Amount of Each Receipt this Period 375.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Commercial Partners Title, LLC | | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1375.00 | | | |

| | | | | | |
|---|---|-------------------------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Mark E. Winter | | Date of Receipt MM / DD / YYYY 09 / 10 / 2010 | | |
| | Mailing Address 1818 N St NW Ste 700 | | Transaction ID: A2FF339066BF143EAB36 | | |
| | City Washington | State DC | Zip Code 20036 | Amount of Each Receipt this Period 555.55 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Stewart Title Guaranty Company | | Occupation E.V.P. Public Policy | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 3333.35 | | | |

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1930.55 |
| TOTAL This Period (last page this line number only) | ▶ | 16337.22 |

**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 / 34

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Bank of America | Transaction ID: B7183D5CE076C4FF2A41 |
| | Mailing Address 1801 K Street | Date of Disbursement MM / DD / YYYY 09 / 01 / 2010 |
| | City Washington State DC Zip Code 20006 | Amount of Each Disbursement this Period 4.95 |
| | Purpose of Disbursement Bank Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Bank of America | Transaction ID: BC9A08CB9FE774C1DAD7 |
| | Mailing Address 1801 K Street | Date of Disbursement MM / DD / YYYY 09 / 01 / 2010 |
| | City Washington State DC Zip Code 20006 | Amount of Each Disbursement this Period 77.36 |
| | Purpose of Disbursement Bank Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Bank of America | Transaction ID: B485B5A06661B450FA26 |
| | Mailing Address 1801 K Street | Date of Disbursement MM / DD / YYYY 09 / 15 / 2010 |
| | City Washington State DC Zip Code 20006 | Amount of Each Disbursement this Period 21.53 |
| | Purpose of Disbursement Bank Fee | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 103.84 |
| 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 21 / 34

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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)
Title Industry Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 1801 K Street

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B4AE4D296215A4E77A12

Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

76.29

SUBTOTAL of Disbursements This Page (optional)

76.29

TOTAL This Period (last page this line number only)

180.13

**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 22 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS <hr/> Mailing Address 14 Knightswood Drive <hr/> City Marlton State NJ Zip Code 08053 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. John Adler <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B142EA8E7E48A4AE8B6C Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/ Type |
| | (Empty box for Category/Type) |
| B. Full Name (Last, First, Middle Initial) BACHUS FOR CONGRESS COMMITTEE <hr/> Mailing Address PO Box 131134 <hr/> City Birmingham State AL Zip Code 35213 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Spencer Bachus <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 06 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BD6EB47C787B24B45BBA Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/ Type |
| | (Empty box for Category/Type) |
| C. Full Name (Last, First, Middle Initial) Bluegrass Committee <hr/> Mailing Address 400 N Capitol St NW #585 <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement 2010 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2010 | Transaction ID: BA6016EA10E084F6CB92 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | (Empty box for Category/Type) |

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

(Empty box for Total)

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 23 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) BRAD MILLER FOR UNITED STATES CONGRESS</p> <p>Mailing Address PO Box 10322</p> <p>City Raleigh State NC Zip Code 27605</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Brad Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BB0AC1E4BF3934864981</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS</p> <p>Mailing Address PO Box 177</p> <p>City Boonesville State MS Zip Code 38829</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Travis W. Childers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BE71D555E99F54E14898</p> <p>Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) CHRIS LEE FOR CONGRESS</p> <p>Mailing Address PO Box 15395</p> <p>City Rochester State NY Zip Code 14615</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Chris J. Lee</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B567F79734A734E5C863</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Crowley for Congress Mailing Address 84-56 Grand Ave City Elmhurst State NY Zip Code 11373 Purpose of Disbursement Contribution Candidate Name Rep. Joseph Crowley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B1EE692F7823D4744B2D Date of Disbursement 09 / 20 / 2010 |
| | Amount of Each Disbursement this Period 1500.00 |
| | Category/ Type |
| | Category/ Type |
| B. Full Name (Last, First, Middle Initial) DAN COATS FOR INDIANA Mailing Address PO BOX 301141 City INDIANAPOLIS State IN Zip Code 46230 Purpose of Disbursement Contribution Candidate Name Daniel R Coats Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B61D0CCFB763B4D1CAB0 Date of Disbursement 09 / 13 / 2010 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/ Type |
| | Category/ Type |
| C. Full Name (Last, First, Middle Initial) DEFEND AMERICA PAC Mailing Address 700 12th St. NW Ste. 700 City Washington State DC Zip Code 20005 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2010 | Transaction ID: BEDC7F755957448338E0 Date of Disbursement 09 / 21 / 2010 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/ Type |
| | Category/ Type |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 3500.00 |
| 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 27 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) FORWARD TOGETHER PAC</p> <p>Mailing Address 201 North Union Street Suite 300</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement 2010 Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2010</p> | <p>Transaction ID: BB8FC8C379AD44484B27</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID</p> <p>Mailing Address P.O. BOX 19163</p> <p>City LAS VEGAS State NV Zip Code 89132</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BA4D3A77182A64783B0F</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) FRIENDS OF CHARLIE WILSON</p> <p>Mailing Address PO Box 160</p> <p>City Bellaire State OH Zip Code 43906</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Charles A. Wilson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B4E753346664845F4A44</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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 28 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | | | | | | | | | | | | | | | | | | | | | | | |
|-----------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF KELLY AYOTTE Mailing Address PO BOX 233 City NASHUA State NH Zip Code 03061 Purpose of Disbursement Contribution Candidate Name KELLY A AYOTTE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B1067559D299E44DCA16 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 2 | 7 | | 2 | 0 | 1 | 0 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 9 | | 2 | 7 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | | |
| B. | Full Name (Last, First, Middle Initial) FRIENDS OF MIKE LEE INC Mailing Address 190 WEST 800 NORTH STE 100 City PROVO State UT Zip Code 84601 Purpose of Disbursement Contribution Candidate Name Mike Lee Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B9F2960EABB7049648D2 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 3 | | 2 | 0 | 1 | 0 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 9 | | 1 | 3 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER Mailing Address 509 Madison Ave, Suite 1902 City New York State NY Zip Code 10022 Purpose of Disbursement Contribution Candidate Name Sen. Charles E. Schumer Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B1704009121DE4611B84 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 2 | 1 | | 2 | 0 | 1 | 0 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 9 | | 2 | 1 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | <table border="1"> <tr> <td style="font-weight: bold;">3000.00</td> </tr> </table> | 3000.00 |
| 3000.00 | | |
| TOTAL This Period (last page this line number only) ▶ | <table border="1"> <tr> <td style="height: 20px;"></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 29 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) GEORGIANS FOR ISAKSON <hr/> Mailing Address PO Box 250116 <hr/> City Atlanta State GA Zip Code 30325 <hr/> Purpose of Disbursement Contribution Candidate Name Sen. Johnny Isakson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B4833D36768524FDB87A Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/ Type |
| | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) GEORGIANS FOR ISAKSON <hr/> Mailing Address PO Box 250116 <hr/> City Atlanta State GA Zip Code 30325 <hr/> Purpose of Disbursement Contribution Candidate Name Sen. Johnny Isakson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B0A24835248B44E46AE9 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 1000.00 |
| | Category/ Type |
| | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) GEORGIANS FOR ISAKSON <hr/> Mailing Address PO Box 250116 <hr/> City Atlanta State GA Zip Code 30325 <hr/> Purpose of Disbursement Contribution Candidate Name Sen. Johnny Isakson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B136832D7D2D24E5CB25 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 2000.00 |
| | Category/ Type |
| | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 30 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) HOEVEN FOR SENATE</p> <p>Mailing Address PO BOX 861</p> <p>City Bismark State ND Zip Code 58502</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Hon. John Hoeven</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BB496F0EE5201465F833</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO Box 87</p> <p>City Uwchland State PA Zip Code 19480</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Jim W. Gerlach</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B8B49B12F237943F7A3E</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) JIM HIMES FOR CONGRESS</p> <p>Mailing Address 857 Post Rd, #312</p> <p>City Fairfield State CT Zip Code 06824</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. James A. Himes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B65C47DCCEEC2420F9F2</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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)
Title Industry Political Action Committee

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) JUDY BIGGERT FOR CONGRESS</p> <p>Mailing Address P.O. Box 637</p> <p>City Hinsdale State IL Zip Code 60522</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Judy Biggert</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 13</p> | <p>Transaction ID: B0BD56E3B4B9744ECB42</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> |
| <p>B. Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS</p> <p>Mailing Address 1900 Glades Road Suite</p> <p>City Boca Raton State FL Zip Code 33431</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Ron Klein</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 22</p> | <p>Transaction ID: B26F453247A584C89947</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> |
| <p>C. Full Name (Last, First, Middle Initial) MINNICK FOR CONGRESS</p> <p>Mailing Address 8150 W Emerald, Suite 170</p> <p>City Boise State ID Zip Code 83764</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Walt Minnick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ID District: 01</p> | <p>Transaction ID: B94AAE953B70947169E1</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> |

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|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="7500.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS</p> <p>Mailing Address 235 Montgomery Street 3rd Floor</p> <p>City San Francisco State CA Zip Code 94104</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Nancy Pelosi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 08</p> | <p>Transaction ID: BF982E25FB94F4F6B9B1</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE - RECOUNT FUND</p> <p>Mailing Address 320 FIRST ST</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2010</p> | <p>Transaction ID: B31F97C826CAB48EA994</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) PERLMUTTER FOR CONGRESS</p> <p>Mailing Address 3440 Youngfield Street, #264</p> <p>City Wheat Ridge State CO Zip Code 80033</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Ed Perlmutter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B4F8D1C61CB2F4D1AAC1</p> <p>Date of Disbursement 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) SCOTT GARRETT FOR CONGRESS <hr/> Mailing Address PO Box 905 <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. E. Scott Garrett Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BF9866ADF89324F96889 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2010 |
| | Amount of Each Disbursement this Period 1000.00 |
| B. Full Name (Last, First, Middle Initial) SYNERGY PAC <hr/> Mailing Address 6849 OLD DOMINION DRIVE SUITE 222 <hr/> City MCLEAN State VA Zip Code 22101 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2010 | Transaction ID: BF5875AAD010A4DE7BF5 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2010 |
| | Amount of Each Disbursement this Period 2500.00 |
| C. Full Name (Last, First, Middle Initial) TOOMEY FOR SENATE COMMITTEE <hr/> Mailing Address 2720 JORDAN ROAD <hr/> City OREFIELD State PA Zip Code 18069 <hr/> Purpose of Disbursement Contribution Candidate Name Patrick J TOOMEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BD90EB90A8CB2452394F Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010 |
| | Amount of Each Disbursement this Period 5000.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 / 34

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Title Industry Political Action Committee

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) WALBERG FOR CONGRESS</p> <p>Mailing Address 6769 Teachout Rd.</p> <p>City Tipton State MI Zip Code 49287</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Tim Walberg</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B01B72D9A134A481C8E1</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) WALDEN FOR CONGRESS</p> <p>Mailing Address PO Box 1091</p> <p>City Hood River State OR Zip Code 97031</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Greg Walden</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BC38FD2E19E5A434B877</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Wyden for Senate</p> <p>Mailing Address PO Box 3498 7036 N Wall Ave</p> <p>City Portland State OR Zip Code 97208</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Ron Wyden</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B8FDDF19E666141FA9EF</p> <p>Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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

70750.00