

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
Appalachian Community Action Political Action Committee

ADDRESS (number and street) 7 South Sixth Street
 Check if different than previously reported. (ACC)
Jacksonville OH 45740

2. **FEC IDENTIFICATION NUMBER** C00412213
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 07 01 2008 through 09 30 2008

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

Type or Print Name of Treasurer Mrs. Mona J Craig

Signature of Treasurer Electronically Filed by Mrs. Mona J Craig Date 10 14 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Appalachian Community Action Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; 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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		12613.81
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	13616.81									
(c) Total Receipts (from Line 19)	14826.25	18836.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28443.06	31450.06								
7. Total Disbursements (from Line 31)	23226.64	26233.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5216.42	5216.42								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Appalachian Community Action Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5114.50	5414.50
(i) Itemized (use Schedule A)	9711.75	13421.75
(ii) Unitemized	14826.25	18836.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	14826.25	18836.25
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	14826.25	18836.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14826.25	18836.25

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	23226.64	24233.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	23226.64	24233.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	1000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
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))..	23226.64	26233.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23226.64	26233.64

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)	14826.25	18836.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14826.25	18836.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	23226.64	24233.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23226.64	24233.64

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 31
(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)
Appalachian Community Action Political Action Committee

A.

Full Name (Last, First, Middle Initial) Ms. Ruth Allison		Date of Receipt MM / DD / YYYY 08 / 13 / 2008
Mailing Address 49140 Pancake Road		Transaction ID: SA11AI.6822
City Rogers	State OH	Zip Code 44455
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 402.00
Name of Employer Columbiana CAC	Occupation Program Manager	In-kind -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.00	

B.

Full Name (Last, First, Middle Initial) Mr. David Brightbill		Date of Receipt MM / DD / YYYY 07 / 14 / 2008
Mailing Address 347 Main Street		Transaction ID: SA11AI.6956
City Lower Salem	State OH	Zip Code 45745
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Washington - Morgan CAC	Occupation Executive Director	Donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.

Full Name (Last, First, Middle Initial) Mr. David Brightbill		Date of Receipt MM / DD / YYYY 08 / 13 / 2008
Mailing Address 347 Main Street		Transaction ID: SA11AI.6655
City Lower Salem	State OH	Zip Code 45745
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Washington - Morgan CAC	Occupation Executive Director	Fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	552.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 31
(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)
Appalachian Community Action Political Action Committee

A.

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

Mailing Address 347 Main Street

City State Zip Code
Lower Salem OH 45745

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

Name of Employer Occupation
Washington - Morgan CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.50

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6743

Amount of Each Receipt this Period
27.50

Auction

B.

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

Mailing Address 347 Main Street

City State Zip Code
Lower Salem OH 45745

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

Name of Employer Occupation
Washington - Morgan CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.50

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6860

Amount of Each Receipt this Period
40.00

In-kind -

C.

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

Mailing Address 347 Main Street

City State Zip Code
Lower Salem OH 45745

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

Name of Employer Occupation
Washington - Morgan CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6905

Amount of Each Receipt this Period
47.50

In-kind -

SUBTOTAL of Receipts This Page (optional) ► **115.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 31
(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)
Appalachian Community Action Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mrs. Carolyn Burris		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	8													
Mailing Address 916 Main Street		Transaction ID: SA11AI.6601																				
City Caldwell State OH Zip Code 43724		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>300.00</td></tr></table>	300.00																			
300.00																						
FEC ID number of contributing federal political committee. C		Fundraiser																				
Name of Employer GMN CAC	Occupation Housing Director																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>350.00</td></tr></table>	350.00																				
350.00																						

B.

Full Name (Last, First, Middle Initial) Mrs. Carolyn Burris		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><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>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	8													
Mailing Address 916 Main Street		Transaction ID: SA11AI.6745																				
City Caldwell State OH Zip Code 43724		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>20.00</td></tr></table>	20.00																			
20.00																						
FEC ID number of contributing federal political committee. C		Auction																				
Name of Employer GMN CAC	Occupation Housing Director																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>370.00</td></tr></table>	370.00																				
370.00																						

C.

Full Name (Last, First, Middle Initial) Mr. Robert Garbo		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><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>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	8													
Mailing Address 18976 Red Dog Road		Transaction ID: SA11AI.6961																				
City Glouster State OH Zip Code 45732		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>100.00</td></tr></table>	100.00																			
100.00																						
FEC ID number of contributing federal political committee. C		Donation																				
Name of Employer Hocking-Athens-Perry CAA	Occupation Executive Director																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>400.00</td></tr></table>	400.00																				
400.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">420.00</td></tr></table>	420.00
420.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table>	

**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 9 / 31
	<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)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Robert Garbo		Date of Receipt
	Mailing Address 18976 Red Dog Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Glouster	OH	45732
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6593
Name of Employer Hocking-Athens-Perry CAA		Occupation Executive Director	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"/> 150.00
		<input type="text"/> 550.00	Fundraiser

B.	Full Name (Last, First, Middle Initial) Mr. Robert Garbo		Date of Receipt
	Mailing Address 18976 Red Dog Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Glouster	OH	45732
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6792
Name of Employer Hocking-Athens-Perry CAA		Occupation Executive Director	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"/> 17.50
		<input type="text"/> 567.50	Auction

C.	Full Name (Last, First, Middle Initial) Mr. Donald Gossett		Date of Receipt
	Mailing Address 868 Tark Hill		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Grayson	KY	41143
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6960
Name of Employer Ironton - Lawrence CAA		Occupation Executive Director	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"/> 100.00
		<input type="text"/> 300.00	Donation

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 267.50
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 10 / 31
(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)
Appalachian Community Action Political Action Committee

A.

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

Mailing Address 868 Tark Hill

City State Zip Code
Grayson KY 41143

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

Name of Employer Occupation
Ironton - Lawrence CAA Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6664

Amount of Each Receipt this Period
300.00

Fundraiser

B.

Full Name (Last, First, Middle Initial)
Ms. Toni Graves

Mailing Address 104 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6589

Amount of Each Receipt this Period
100.00

Fundraiser

C.

Full Name (Last, First, Middle Initial)
Ms. Toni Graves

Mailing Address 104 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6785

Amount of Each Receipt this Period
305.00

Auction

SUBTOTAL of Receipts This Page (optional) ▶ **705.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 31
(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)
Appalachian Community Action Political Action Committee

A.

Full Name (Last, First, Middle Initial) Ms. Michele Lucas		Date of Receipt MM / DD / YYYY 08 / 13 / 2008
Mailing Address 213 E. 14th Street		Transaction ID: SA11AI.6721
City Dover	State OH	Zip Code 44622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Harcatus CAC	Occupation Community Services Director	Fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

B.

Full Name (Last, First, Middle Initial) Ms. Michele Lucas		Date of Receipt MM / DD / YYYY 08 / 13 / 2008
Mailing Address 213 E. 14th Street		Transaction ID: SA11AI.6797
City Dover	State OH	Zip Code 44622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.00
Name of Employer Harcatus CAC	Occupation Community Services Director	Auction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.00	

C.

Full Name (Last, First, Middle Initial) Ms. Michele Lucas		Date of Receipt MM / DD / YYYY 08 / 13 / 2008
Mailing Address 213 E. 14th Street		Transaction ID: SA11AI.6809
City Dover	State OH	Zip Code 44622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.00
Name of Employer Harcatus CAC	Occupation Community Services Director	In-kind -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 31
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Michele Lucas

Mailing Address 213 E. 14th Street

City State Zip Code
Dover OH 44622

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

Name of Employer Occupation
Harcatus CAC Community Services Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6931

Amount of Each Receipt this Period
40.00

In-kind -

B. Full Name (Last, First, Middle Initial)
Mr. Roger McCauley

Mailing Address 10271 Antle Orchard Road

City State Zip Code
Glouster OH 45732

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

Name of Employer Occupation
COAD Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2008

Transaction ID: SA11AI.6959

Amount of Each Receipt this Period
100.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Roger McCauley

Mailing Address 10271 Antle Orchard Road

City State Zip Code
Glouster OH 45732

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

Name of Employer Occupation
COAD Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6659

Amount of Each Receipt this Period
100.00

Fundraiser

SUBTOTAL of Receipts This Page (optional) ▶ **240.00**

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 / 31

(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)
Appalachian Community Action Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Roger McCauley

Mailing Address 10271 Antle Orchard Road

City State Zip Code
Glouster OH 45732

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

Name of Employer Occupation
COAD Executive Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 445.00

Date of Receipt

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

Transaction ID: SA11AI.6891

Amount of Each Receipt this Period

20.00

In-kind -

B.

Full Name (Last, First, Middle Initial)

Mr. Roger McCauley

Mailing Address 10271 Antle Orchard Road

City State Zip Code
Glouster OH 45732

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

Name of Employer Occupation
COAD Executive Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

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

Transaction ID: SA11AI.6895

Amount of Each Receipt this Period

5.00

In-kind -

C.

Full Name (Last, First, Middle Initial)

Mr. Roger McCauley

Mailing Address 10271 Antle Orchard Road

City State Zip Code
Glouster OH 45732

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

Name of Employer Occupation
COAD Executive Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 995.00

Date of Receipt

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

Transaction ID: SA11AI.6934

Amount of Each Receipt this Period

545.00

Fundraiser

SUBTOTAL of Receipts This Page (optional) ▶

570.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Alvin Norris

Mailing Address 4173 Bardwell Road

City State Zip Code
Mt. Orab OH 45154

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

Name of Employer Occupation
Adams - Brown CAA Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6923

Amount of Each Receipt this Period
30.00

In-kind -

B. Full Name (Last, First, Middle Initial)
Mr. Gary Obloy

Mailing Address 116 High Street

City State Zip Code
St. Clairsville OH 43950

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

Name of Employer Occupation
Belmont County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6836

Amount of Each Receipt this Period
15.00

In-kind -

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

Mailing Address 116 High Street

City State Zip Code
St. Clairsville OH 43950

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

Name of Employer Occupation
Belmont County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6880

Amount of Each Receipt this Period
20.00

In-kind -

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

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

Mailing Address 4184 Darrow Road

City State Zip Code
Stow OH 44224

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

Name of Employer Occupation
Columbia County CAC Technology Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6588

Amount of Each Receipt this Period
300.00

Fundraiser

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

Mailing Address 4184 Darrow Road

City State Zip Code
Stow OH 44224

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

Name of Employer Occupation
Columbia County CAC Technology Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6650

Amount of Each Receipt this Period
75.00

Fundraiser

C. Full Name (Last, First, Middle Initial)
Mr Keith Pitts

Mailing Address 4184 Darrow Road

City State Zip Code
Stow OH 44224

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

Name of Employer Occupation
Columbia County CAC Technology Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6876

Amount of Each Receipt this Period
20.00

In-kind -

SUBTOTAL of Receipts This Page (optional) ► **395.00**

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 16 / 31

(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)

Appalachian Community Action Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tom Reed

Mailing Address 141 Mulberry Avenue

City State Zip Code
Pomeroy OH 45769

FEC ID number of contributing federal political committee.

C

Name of Employer
Gallia - Meigs CAC

Occupation
Executive Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2008

Transaction ID: SA11AI.6958

Amount of Each Receipt this Period

100.00

Donation

B.

Full Name (Last, First, Middle Initial)

Mr. Tom Reed

Mailing Address 141 Mulberry Avenue

City State Zip Code
Pomeroy OH 45769

FEC ID number of contributing federal political committee.

C

Name of Employer
Gallia - Meigs CAC

Occupation
Executive Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6618

Amount of Each Receipt this Period

300.00

Fundraiser

C.

Full Name (Last, First, Middle Initial)

Mr. Tom Reed

Mailing Address 141 Mulberry Avenue

City State Zip Code
Pomeroy OH 45769

FEC ID number of contributing federal political committee.

C

Name of Employer
Gallia - Meigs CAC

Occupation
Executive Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6648

Amount of Each Receipt this Period

25.00

Fundraiser

SUBTOTAL of Receipts This Page (optional) ▶

425.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 31		
	<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

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Tom Reed	Date of Receipt MM / DD / YYYY 08 / 13 / 2008
	Mailing Address 141 Mulberry Avenue	Transaction ID: SA11AI.6776
	City Pomeroy State OH Zip Code 45769	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	Auction
	Name of Employer Gallia - Meigs CAC Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 685.00	

B.	Full Name (Last, First, Middle Initial) Mr. Tom Reed	Date of Receipt MM / DD / YYYY 08 / 13 / 2008
	Mailing Address 141 Mulberry Avenue	Transaction ID: SA11AI.6864
	City Pomeroy State OH Zip Code 45769	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	In-kind -
	Name of Employer Gallia - Meigs CAC Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 730.00	

C.	Full Name (Last, First, Middle Initial) Mr. Ray Roberts	Date of Receipt MM / DD / YYYY 08 / 13 / 2008
	Mailing Address 104 W. 4th Street	Transaction ID: SA11AI.6586
	City Piketon State OH Zip Code 45661	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	Fundraiser
	Name of Employer Pike County CAC Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional)	205.00
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 18 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Ray Roberts

Mailing Address 104 W. 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6760

Amount of Each Receipt this Period
45.00

Auction

B. Full Name (Last, First, Middle Initial)
Mr. Ray Roberts

Mailing Address 104 W. 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6846

Amount of Each Receipt this Period
45.00

In-kind -

C. Full Name (Last, First, Middle Initial)
Mr. Ray Roberts

Mailing Address 104 W. 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6907

Amount of Each Receipt this Period
100.00

In-kind -

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Ray Roberts

Mailing Address 104 W. 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6917

Amount of Each Receipt this Period
275.00

In-kind -

B. Full Name (Last, First, Middle Initial)
Mr. Ray Roberts

Mailing Address 104 W. 4th Street

City State Zip Code
Piketon OH 45661

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

Name of Employer Occupation
Pike County CAC Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2008

Transaction ID: SA11AI.6868

Amount of Each Receipt this Period
30.00

In-kind -

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

Mailing Address 427 Strecker Lane

City State Zip Code
Marietta OH 45750

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

Name of Employer Occupation
Schwendeman Insurance self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.50

Date of Receipt
MM / DD / YYYY
08 / 13 / 2008

Transaction ID: SA11AI.6775

Amount of Each Receipt this Period
207.50

Auction

SUBTOTAL of Receipts This Page (optional) ▶ **512.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 31
(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)
Appalachian Community Action Political Action Committee

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

Mailing Address 427 Strecker Lane

City Marietta State OH Zip Code 45750

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

Name of Employer Schwendeman Insurance Occupation self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt 08 / 13 / 2008

Transaction ID: SA11AI.6913

Amount of Each Receipt this Period 55.00

In-kind -

B. Full Name (Last, First, Middle Initial)
Mrs. Geraldine Spencer

Mailing Address Route 6 Box 2558

City Marietta State OH Zip Code 45750

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

Name of Employer Washington - Morgan CAC Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt 08 / 13 / 2008

Transaction ID: SA11AI.6742

Amount of Each Receipt this Period 62.50

Auction

C. Full Name (Last, First, Middle Initial)
Mr. Bill Thacker

Mailing Address 4235 Rhodes Avenue

City New Boston State OH Zip Code 45662

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

Name of Employer Scioto County CAC Occupation Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 14 / 2008

Transaction ID: SA11AI.6957

Amount of Each Receipt this Period 100.00

Donation

SUBTOTAL of Receipts This Page (optional) ▶ 217.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 31	
	(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)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Bill Thacker		Date of Receipt
	Mailing Address 4235 Rhodes Avenue		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New Boston	OH	45662
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Scioto County CAC		Occupation Planner	Transaction ID: SA11AI.6729
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="425.00"/>	<input type="text" value="100.00"/>
			Fundraiser

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5114.50"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms. Ruth Allison	Transaction ID: SB21B.6823 Date of Disbursement 08 / 13 / 2008
	Mailing Address 49140 Pancake Road	Amount of Each Disbursement this Period 402.00
	City Rogers State OH Zip Code 44455	
	Purpose of Disbursement In-kind - Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Committee to Elect Alan Sayre	Transaction ID: SB21B.7021 Date of Disbursement 08 / 29 / 2008
	Mailing Address 1420 Parkdale Drive	Amount of Each Disbursement this Period 500.00
	City Dover State OH Zip Code 44622	
	Purpose of Disbursement Political Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Clyde Committee to Elect Clyde Evans	Transaction ID: SB21B.7003 Date of Disbursement 08 / 29 / 2008
	Mailing Address 514 2nd Avenue	Amount of Each Disbursement this Period 500.00
	City Gallipolis State OH Zip Code 45631	
	Purpose of Disbursement Political Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1402.00
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 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)
Appalachian Community Action Political Action Committee

A. Full Name (Last, First, Middle Initial) Committee to Elect Danny Bubp Mailing Address 307 N. Market Street City West Union State OH Zip Code 45693 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7010 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	Category/Type Amount of Each Disbursement this Period 250.00	

B. Full Name (Last, First, Middle Initial) Committee to Elect Debbie Phillips Mailing Address 48 Hudson Avenue City Athens State OH Zip Code 45701 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7017 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	Category/Type Amount of Each Disbursement this Period 500.00	

C. Full Name (Last, First, Middle Initial) Committee to Elect Jennifer Stewart Mailing Address 320 Main Street City Zanesville State OH Zip Code 43701 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7018 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	Category/Type Amount of Each Disbursement this Period 500.00	

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL 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)

<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)
Appalachian Community Action Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect John Domenich</p> <p>Mailing Address 1781 Main Street</p> <p>City Smithfield State OH Zip Code 43948</p> <p>Purpose of Disbursement Political 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7020</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Linda Bolon</p> <p>Mailing Address 32 Malibu Drive</p> <p>City East Palestine State OH Zip Code 44413</p> <p>Purpose of Disbursement Political 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7000</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Nielaus</p> <p>Mailing Address 1131 Little Indian Creek Road</p> <p>City Richmond State OH Zip Code 45157</p> <p>Purpose of Disbursement Political 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6997</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Appalachian Community Action Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Todd Book</p> <p>Mailing Address 421 Little Cheryl Drive</p> <p>City McDermott State OH Zip Code 45622</p> <p>Purpose of Disbursement Political 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7012</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Daniels for State Representative</p> <p>Mailing Address 612 Sharon Mill Center</p> <p>City Worthington State OH Zip Code 43085</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6964</p> <p>Date of Disbursement 07 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Dan Dodd</p> <p>Mailing Address 4323 W. North Bank Road</p> <p>City Millersport State OH Zip Code 43046</p> <p>Purpose of Disbursement Political 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7013</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional)	1500.00
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 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)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) Families for John Schlichter	Transaction ID: SB21B.6999
	Mailing Address 9491 SR 753	Date of Disbursement MM / DD / YYYY 08 / 29 / 2008
	City Greenfield State OH Zip Code 45123	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Political Contribution	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) Charlie Friends of Charlie Wilson	Transaction ID: SB21B.6995
	Mailing Address 7 Cadiz Pike	Date of Disbursement MM / DD / YYYY 08 / 29 / 2008
	City Bridgeport State OH Zip Code 43912	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution	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) Jason Willson for State Senate	Transaction ID: SB21B.6973
	Mailing Address P.O. Box 61	Date of Disbursement MM / DD / YYYY 07 / 23 / 2008
	City St. Clairsville State OH Zip Code 43950	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution	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) ▶

2500.00

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 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)
Appalachian Community Action Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Jennifer Garrison for State Representative Committee</p> <p>Mailing Address 427 Fifth Street</p> <p>City Marietta State OH Zip Code 45750</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Committee to Elect Jennifer Garrison</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6971</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Jimmy Stewart for State Representative</p> <p>Mailing Address 477 Richland Avenue</p> <p>City Athens State OH Zip Code 45701</p> <p>Purpose of Disbursement Political 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6998</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) North Hills Lanes</p> <p>Mailing Address 318 Colegate Drive</p> <p>City Marietta State OH Zip Code 45750</p> <p>Purpose of Disbursement Bowling fundraiser expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7022</p> <p>Date of Disbursement 09 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 501.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2001.50

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) Okey for Ohio Committee	Transaction ID: SB21B.7001 Date of Disbursement 08 / 29 / 2008
	Mailing Address 63 Second Street, SW	Amount of Each Disbursement this Period 500.00
	City Carrollton State OH Zip Code 44615	
	Purpose of Disbursement Political Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Ray Roberts	Transaction ID: SB21B.6918 Date of Disbursement 08 / 13 / 2008
	Mailing Address 104 W. 4th Street	Amount of Each Disbursement this Period 275.00
	City Piketon State OH Zip Code 45661	
	Purpose of Disbursement In-kind - Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Ray Roberts	Transaction ID: SB21B.6869 Date of Disbursement 08 / 14 / 2008
	Mailing Address 104 W. 4th Street	Amount of Each Disbursement this Period 30.00
	City Piketon State OH Zip Code 45661	
	Purpose of Disbursement In-kind - Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	805.00
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 29 / 31

<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)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) TED STRICKLAND	Transaction ID: SB21B.7023 Date of Disbursement 09 / 15 / 2008	
	Mailing Address 1337 THOMAS HOLLOW ROAD BOX 580		
	City LUCASVILLE State OH Zip Code 45648	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Political Contribution		
	Candidate Name	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) VISA Cardmember Service	Transaction ID: SB21B.6980 Date of Disbursement 08 / 28 / 2008	
	Mailing Address P.O. Box 15153		
	City Wilmington State DE Zip Code 19886-5153	Amount of Each Disbursement this Period 1929.75	
	Purpose of Disbursement Golf fundraiser expenses		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Golf Course of West Virginia	Transaction ID: SB21B.6980.0 Date of Disbursement 08 / 13 / 2008	
	Mailing Address Route 1 Box 199		
	City Waverly State WV Zip Code 26184	Amount of Each Disbursement this Period 1876.00	
	Purpose of Disbursement Golf course fees for fundraiser		
	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) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

6929.75

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Appalachian Community Action Political Action Committee

A.	Full Name (Last, First, Middle Initial) VISA Cardmember Service <hr/> Mailing Address P.O. Box 15153 <hr/> City Wilmington State DE Zip Code 19886-5153 <hr/> Purpose of Disbursement golf fundraiser expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7024 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 273.75 <hr/> Category/ Type
B.	Full Name (Last, First, Middle Initial) Golf Course of West Virginia <hr/> Mailing Address Route 1 Box 199 <hr/> City Waverly State WV Zip Code 26184 <hr/> Purpose of Disbursement golf fundraiser expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.7024.0 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 273.75 <hr/> Category/ Type [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) WULSIN FOR CONGRESS <hr/> Mailing Address 1080 Nimitzview Dr. Suite 400 <hr/> City Cincinnati State OH Zip Code 45230 <hr/> Purpose of Disbursement Political Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6975 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1273.75

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 31 / 31

<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)

Appalachian Community Action Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Zack Space for Congress Committee

Mailing Address 714 North Wooster Avenue

City State Zip Code
Dover OH 44622

Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6996

Date of Disbursement

08 / 29 / 2008

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)

20662.00