

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
National Pro-Life Alliance PAC

ADDRESS (number and street) 4521 Windsor Arms CT  
 Check if different than previously reported. (ACC)  
Annandale VA 22003

2. **FEC IDENTIFICATION NUMBER** C00358051  
**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 09 12 2006 in the State of AZ  
(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 2006 through 08 23 2006

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

Signature of Treasurer Electronically Filed by Mr. Steve Antosh Date 08 31 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
National Pro-Life Alliance PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
2	3

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		164441.82
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	210259.88									
(c) Total Receipts (from Line 19) .....	178399.00	237312.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	388658.88	401754.16								
7. Total Disbursements (from Line 31) .....	17368.68	30463.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	371290.20	371290.20								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
National Pro-Life Alliance PAC

Report Covering the Period: From:    To:

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	2500.00	14300.00
(i) Itemized (use Schedule A) .....	175899.00	223012.34
(ii) Unitemized .....	178399.00	237312.34
(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) .....	178399.00	237312.34
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)) .....	178399.00	237312.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	178399.00	237312.34

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	28000.00
24. Independent Expenditure (use Schedule E) .....	2368.68	2368.68
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	95.28
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))..	17368.68	30463.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	17368.68	30463.96

**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) .....	178399.00	237312.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	178399.00	237312.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<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	

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

NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Jacques Bergeron

Mailing Address 18 Duff Street

City State Zip Code  
Watertown MA 02472-3016

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

Name of Employer Disabled Occupation Not Employed

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: SA11A1.15737

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John Christensen

Mailing Address 301 S San Joaquin St. #202

City State Zip Code  
Stockton CA 95203-3547

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

Name of Employer Retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 04 / 2006

Transaction ID: SA11A1.15076

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Monica Creedon

Mailing Address 9490 Harbor Greens Way A

City State Zip Code  
Seminole FL 33776-1263

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

Name of Employer Requested Occupation Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 10 / 2006

Transaction ID: SA11A1.10470

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr. Robert C. Culpepper

Mailing Address 525 Park Place Dr.

City State Zip Code  
Alexandria LA 71301-3947

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

Name of Employer Requested Occupation Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	6

Transaction ID: SA11A1.16706

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Rev. Msgr John Cymbor

Mailing Address 54345 High Ridge Road

City State Zip Code  
Bridgeport OH 43912-8733

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

Name of Employer Requested Occupation Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	0	6

Transaction ID: SA11A1.21562

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kathy Dewines

Mailing Address 6921 Lark Lane

City State Zip Code  
Knoxville TN 37919-5929

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

Name of Employer Requested Occupation Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

Transaction ID: SA11A1.21564

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David Miles		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 7686 Herber Road		Transaction ID: SA11A1.21347
City State Zip Code New Tripoli PA 18066-3433	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Miriam Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 2005 W Huntsville St.		Transaction ID: SA11A1.21343
City State Zip Code Broken Arrow OK 74011-6097	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Marion Zarzeczna		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address 500 Centre Street		Transaction ID: SA11A1.21563
City State Zip Code Trenton NJ 08611-3018	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Requested Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Curtis Institute of music Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial) <b>A. Angle for Congress</b>		<b>Transaction ID:</b> SB23.21578
Mailing Address P.O. Box 33058		Date of Disbursement 08 / 08 / 2006
City Reno	State NV	Zip Code 89533
Purpose of Disbursement	Amount of Each Disbursement this Period 5000.00	
Candidate Name Angle for Congress	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District: 2		

Full Name (Last, First, Middle Initial) <b>B. GRAF FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.21573
Mailing Address 287 W EL NOPAL		Date of Disbursement 08 / 02 / 2006
City GREEN VALLEY	State AZ	Zip Code 85614
Purpose of Disbursement	Amount of Each Disbursement this Period 5000.00	
Candidate Name GRAF FOR CONGRESS	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 08		

Full Name (Last, First, Middle Initial) <b>C. WALBERG FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.21568
Mailing Address 6769 Teachout Road		Date of Disbursement 07 / 21 / 2006
City Tipton	State MI	Zip Code 49287
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name WALBERG FOR CONGRESS	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>11000.00</b>
<b>TOTAL</b> 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 10 / 12

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

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NAME OF COMMITTEE (In Full)  
National Pro-Life Alliance PAC

Full Name (Last, First, Middle Initial) <b>A. WALBERG FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.21569 Date of Disbursement
Mailing Address 6769 Teachout Road		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City Tipton	State MI	Zip Code 49287
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name WALBERG FOR CONGRESS		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State: MI	District: 07	

Full Name (Last, First, Middle Initial) <b>B. WALBERG FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.21570 Date of Disbursement
Mailing Address 6769 Teachout Road		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City Tipton	State MI	Zip Code 49287
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name WALBERG FOR CONGRESS		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State: MI	District: 07	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) National Pro-Life Alliance PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00358051	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6	
Full Name (Last, First, Middle, Initial) of Payee Liberty Production Center		Amount 2368.68	
Mailing Address P.O. Box 8265		Transaction ID: SE24.10362	
City Springfield	State VA	Zip Code 22151-8265	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential
Purpose of Expenditure Voter Mailing		Category/ Type 004	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: DOUGLAS L LAMBORN		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2368.68	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2368.68
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	0.00
(c) <b>TOTAL</b> Independent Expenditures .....	2368.68
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Steve Antosh Signature	Date M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6

Image# 26940314324

Form/Schedule: **SE24** This is the difference between the total expense reported on the 24 Hour Notice filed on 07/31/2006 (\$2,200)  
Transaction ID: **SE24.10362** and the actual billed expense for the voter mailing (\$2,368.68.

\*\*\*\*\*