

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
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

ADDRESS (number and street) 1101 30TH STREET NW SUITE 300
 Check if different than previously reported. (ACC)
WASHINGTON DC 20007

2. **FEC IDENTIFICATION NUMBER** C00236778
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 02 14 2008 through 03 31 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 SR PAUL CULLEN
Signature of Treasurer Electronically Filed by SR PAUL CULLEN Date 04 15 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

Report Covering the Period: From:

M	M
0	2

D	D
1	4

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

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		131793.50
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	104952.89									
(c) Total Receipts (from Line 19)	2279.81	4488.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	107232.70	136282.13								
7. Total Disbursements (from Line 31)	50099.68	79149.11								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57133.02	57133.02								
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

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

Report Covering the Period: From:

M	M
0	2

D	D
1	4

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

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	505.00	505.00
(i) Itemized (use Schedule A)	1322.64	3147.14
(ii) Unitemized	1827.64	3652.14
(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)	1827.64	3652.14
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.)	452.17	836.49
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))	2279.81	4488.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2279.81	4488.63

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.....	99.68	149.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	99.68	149.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	79000.00
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))..	50099.68	79149.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50099.68	79149.11

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)	1827.64	3652.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1827.64	3652.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	99.68	149.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	99.68	149.11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 18
	(check only one)
<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"/>	<input type="checkbox"/> 16
<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)
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.

Full Name (Last, First, Middle Initial) RICKY BLANKENSHIP		Date of Receipt
Mailing Address 23713 HUBER HITLER RD		<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 03 / 31 / 2008
City	State	Zip Code
CIRCLEVILLE	OH	43113-9410
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.33857
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer Self-employed	Occupation	
	Owner-Operator	
Receipt For: 2008	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input checked="" type="checkbox"/> Other (specify) ▼	<input type="text"/> 250.00	
Other		

B.

Full Name (Last, First, Middle Initial) J HOWARD THOMPSON, JR		Date of Receipt
Mailing Address 4917 EVERGREEN WY 201		<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 02 / 27 / 2008
City	State	Zip Code
EVERETT	WA	98203
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.33828
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 255.00
Name of Employer Self-employed	Occupation	
	Owner-Operator	
Receipt For: 2008	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input checked="" type="checkbox"/> Other (specify) ▼	<input type="text"/> 255.00	
Other		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 505.00
TOTAL This Period (last page this line number only)	<input type="text"/> 505.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 18
	(check only one)
<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt
	Mailing Address PO Box 609		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15230-9738
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.33726
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="266.27"/>	
<input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="650.59"/>	Bank interest earned

B.	Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt
	Mailing Address PO Box 609		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15230-9738
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.33727
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="185.90"/>	
<input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="836.49"/>	Bank Interest Earned

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="452.17"/>
TOTAL This Period (last page this line number only)	<input type="text" value="452.17"/>

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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A. Full Name (Last, First, Middle Initial)
ALASKANS FOR DON YOUNG INC.

Mailing Address 2504 Fairbanks Street

City Anchorage State AK Zip Code 99503

Purpose of Disbursement
Contribution

Candidate Name
DONALD E YOUNG

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AK District: 00

Transaction ID: SB23.33728

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
BLUE DOG POLITICAL ACTION COMMITTEE

Mailing Address 6849 Old Dominion Drive
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.33817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
CANDICE MILLER FOR CONGRESS

Mailing Address PO Box 182152

City Shelby Township State MI Zip Code 48318

Purpose of Disbursement
Contribution

Candidate Name
CANDICE S. MILLER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MI District: 10

Transaction ID: SB23.33731

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS	Transaction ID: SB23.33734 Date of Disbursement 03 / 03 / 2008	
	Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1000.00
	City Gaithersburg State MD Zip Code 20878		
	Purpose of Disbursement Contribution		
	Candidate Name NYDIA M VELAZQUEZ		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 12		
B.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: SB23.33742 Date of Disbursement 03 / 07 / 2008	
	Mailing Address 120 MARYLAND AVENUE NE		Amount of Each Disbursement this Period 2000.00
	City WASHINGTON State DC Zip Code 20002		
	Purpose of Disbursement Contribution		
	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) DUNCAN D HUNTER FOR CONGRESS	Transaction ID: SB23.33744 Date of Disbursement 03 / 03 / 2008	
	Mailing Address PO BOX 3917		Amount of Each Disbursement this Period 1000.00
	City LA MESA State CA Zip Code 91944		
	Purpose of Disbursement Contribution		
	Candidate Name DUNCAN HUNTER		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CA District: 52		

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)

<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)
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) DUNCAN FOR CONGRESS	Transaction ID: SB23.33747 Date of Disbursement
	Mailing Address PO BOX 2646	<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City KNOXVILLE State TN Zip Code 37901	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name JOHN REP. JR. DUNCAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF BYRON DORGAN	Transaction ID: SB23.33754 Date of Disbursement
	Mailing Address PO BOX 871	<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City BISMARCK State ND Zip Code 58502	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name BYRON L DORGAN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: SB23.33757 Date of Disbursement
	Mailing Address 18 N. SECOND ST., BOX 37 PO BOX 37	<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City SAINT CLAIR State PA Zip Code 17970	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name T. TIMOTHY HOLDEN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
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)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A. Full Name (Last, First, Middle Initial)
FRIENDS OF DAVE REICHERT

Mailing Address P. O. Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement Contribution

Candidate Name DAVE REICHERT

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: WA District: 08

Transaction ID: SB23.33760

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF DICK DURBIN COMMITTEE

Mailing Address PO BOX 1949

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement Contribution

Candidate Name RICHARD J DURBIN

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.33763

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JIM INHOFE COMMITTEE

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement Contribution

Candidate Name JAMES M INHOFE

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: OK District: 00

Transaction ID: SB23.33766

Date of Disbursement

03 / 07 / 2008

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)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE BACA	Transaction ID: SB23.33769 Date of Disbursement 03 / 21 / 2008	
	Mailing Address 555 Capitol Mall Suite 1425		
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period	4000.00
	Purpose of Disbursement Contribution		
	Candidate Name JOE BACA	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: CA District: 43	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU INC	Transaction ID: SB23.33772 Date of Disbursement 03 / 03 / 2008	
	Mailing Address 607 14TH STREET NW SUITE 800 SUITE 1434		
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution		
	Candidate Name MARY L LANDRIEU	Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: LA District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU INC	Transaction ID: SB23.33775 Date of Disbursement 03 / 07 / 2008	
	Mailing Address 607 14TH STREET NW SUITE 800 SUITE 1434		
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution		
	Candidate Name MARY L LANDRIEU	Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: LA District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT	Transaction ID: SB23.33778 Date of Disbursement 03 / 03 / 2008	
	Mailing Address PO Box 50100 PO Box 50100		
	City Springfield State MO Zip Code 65805	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement Contribution Candidate Name ROY BLUNT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	
B.	Full Name (Last, First, Middle Initial) HAYES FOR CONGRESS	Transaction ID: SB23.33781 Date of Disbursement 03 / 03 / 2008	
	Mailing Address Post Office Box 2000		
	City Concord State NC Zip Code 28026	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name ROBERT C. (ROBIN) HAYES Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	
C.	Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE	Transaction ID: SB23.33784 Date of Disbursement 02 / 15 / 2008	
	Mailing Address PO Box 87		
	City Uwchland State PA Zip Code 19480	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name JIM GERLACH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A. Full Name (Last, First, Middle Initial) KAGEN 4 CONGRESS <hr/> Mailing Address 100 W. College Ave. 50 D <hr/> City Appleton State WI Zip Code 54911 <hr/> Purpose of Disbursement Contribution Candidate Name STEVEN L KAGEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33787 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00
	Category/Type
B. Full Name (Last, First, Middle Initial) LATTA FOR CONGRESS <hr/> Mailing Address 300 North Main Street <hr/> City Bowling Green State OH Zip Code 43402 <hr/> Purpose of Disbursement Contribution Candidate Name ROBERT EDWARD LATTA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33790 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00
	Category/Type
C. Full Name (Last, First, Middle Initial) LOBIONDO FOR CONGRESS <hr/> Mailing Address PO Box 775 <hr/> City Marmora State NJ Zip Code 08223 <hr/> Purpose of Disbursement Contribution Candidate Name FRANK A, LOBIONDO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33750 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A. Full Name (Last, First, Middle Initial) MARIO DIAZ-BALART FOR CONGRESS <hr/> Mailing Address 95 MERRICK WAY, SUITE 250 <hr/> City CORAL GABLES State FL Zip Code 33134 Purpose of Disbursement Contribution Candidate Name MARIO DIAZ-BALART Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33793 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>3</td><td>/</td><td>0</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	3	/	0	3	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
0	3	/	0	3	/	2	0	0	8												
Amount of Each Disbursement this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																				
2000.00																					
B. Full Name (Last, First, Middle Initial) MARION BERRY FOR CONGRESS <hr/> Mailing Address P.O. BOX 8084 P.O. BOX 8084 <hr/> City JONESBORO State AR Zip Code 72403 Purpose of Disbursement Contribution Candidate Name MARION BERRY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33796 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>3</td><td>/</td><td>0</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	3	/	0	3	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
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Amount of Each Disbursement this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																				
1500.00																					
C. Full Name (Last, First, Middle Initial) MCCOTTER CONGRESSIONAL COMMITTEE <hr/> Mailing Address P.O. Box 530788 <hr/> City LIVONIA State MI Zip Code 48153 Purpose of Disbursement Contribution Candidate Name THADDEUS G MR. MCCOTTER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33799 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>2</td><td>/</td><td>2</td><td>0</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	2	/	2	0	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
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Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																				
1000.00																					

SUBTOTAL of Disbursements This Page (optional) ►

4500.00

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)

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<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A. Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE Mailing Address 320 FIRST STREET City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement 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: SB23.33802 Date of Disbursement 03 / 13 / 2008
	Amount of Each Disbursement this Period 2500.00
B. Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN Mailing Address PO BOX 3662 City SEATTLE State WA Zip Code 98124 Purpose of Disbursement Contribution Candidate Name PATTY MURRAY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33804 Date of Disbursement 03 / 02 / 2008
	Amount of Each Disbursement this Period 1000.00
C. Full Name (Last, First, Middle Initial) PETE KING FOR CONGRESS COMMITTEE Mailing Address POST OFFICE BOX 1428 City SEAFORD State NY Zip Code 11783 Purpose of Disbursement Contribution Candidate Name PETER T KING Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33808 Date of Disbursement 03 / 03 / 2008
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A. Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS <hr/> Mailing Address P.O. Box 425 <hr/> City Roswell State GA Zip Code 30077 <hr/> Purpose of Disbursement Contribution Candidate Name DAVID PRICE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33811 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SHELLEY MOORE CAPITO FOR CONGRESS <hr/> Mailing Address P.O. Box 11519 <hr/> City Charleston State WV Zip Code 25339 <hr/> Purpose of Disbursement Contribution Candidate Name SHELLEY MOORE CAPITO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33814 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) TIM MURPHY FOR CONGRESS <hr/> Mailing Address PO Box 24551 <hr/> City Pttsburgh State PA Zip Code 15234 <hr/> Purpose of Disbursement Contribution Candidate Name TIM MURPHY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.33819 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.

Full Name (Last, First, Middle Initial)

TOM FEENEY FOR CONGRESS

Mailing Address P. O. Box 622345

City Oviedo State FL Zip Code 32762

Purpose of Disbursement
Contribution

Candidate Name
TOM FEENEY

Office Sought: House
 Senate
 President

State: FL District: 24

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.33822

Date of Disbursement

MM / DD / YYYY
03 / 13 / 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)

50000.00