03/05/2004 13 : 05

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 Association of Insurance and Financial Advisors Political Action Committee

ADDRESS (number and street) ▼ 2901 Telester Court

Check if different than previously reported. (ACC)

Falls Church | VA | 22042

2. **FEC IDENTIFICATION NUMBER** ▼ C00005249

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT NEW (N) **OR** X 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: X

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 01 01 2004 through 01 31 2004

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 Peter C. Browne

Signature of Treasurer Electronically Filed by Peter C. Browne Date 03 05 2004

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. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
National Association of Insurance and Financial Advisors Political Action Committee

Report Covering the Period: From: 01 01 2004 To: 01 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		766144.29
(b) Cash on Hand at Begining of Reporting Period	766144.29	
(c) Total Receipts (from Line 19)	66526.10	66526.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	832670.39	832670.39
7. Total Disbursements (from Line 31)	307175.98	307175.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	525494.41	525494.41
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)	33601.56	

X 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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Committee

Report Covering the Period: From: 01 01 2004 To: 01 31 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10871.20	
(ii) Unitemized	55654.90	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	66526.10	66526.10
(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) ..... ▶	66526.10	66526.10
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))	66526.10	66526.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	66526.10	66526.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	296175.98	296175.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	296175.98	296175.98
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	11000.00	11000.00
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))	307175.98	307175.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	307175.98	307175.98

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)	66526.10	66526.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	66526.10	66526.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	296175.98	296175.98
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	296175.98	296175.98

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
[X] 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)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. George F. Bashaw, Jr.,CLU
Mailing Address 2207 E. 29th Street
City: Tulsa State: OK Zip Code: 74114-5423
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 01 02 2004
Transaction ID: R1473035
Amount of Each Receipt this Period: 600.00
Check

B.
Full Name (Last, First, Middle Initial)
Mr. R. Michael Condrey, CLU ChFC
Mailing Address 907 Williamson Dr
City: Raleigh State: NC Zip Code: 27608-2307
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 01 05 2004
Transaction ID: R1473102
Amount of Each Receipt this Period: 550.00
Check

C.
Full Name (Last, First, Middle Initial)
Mr. Brian G. Ellerman
Mailing Address 2230 Beachwood Ave
City: Wilmette State: IL Zip Code: 60091-1508
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01 09 2004
Transaction ID: R1473312
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1400.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. Terry K. Headley, LUTCF,LIC
Mailing Address 20704 Meadow Ridge Dr.
City: Springfield State: NE Zip Code: 68059
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 208.00

Date of Receipt: 01 10 2004
Transaction ID: R1470798
Amount of Each Receipt this Period: 208.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Daniel Robert Hefner
Mailing Address 7501 W. Madison St
PO Box 247
City: Forest Park State: IL Zip Code: 60130-0247
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 01 12 2004
Transaction ID: R1473331
Amount of Each Receipt this Period: 600.00
Check

C.
Full Name (Last, First, Middle Initial)
Ms. Magenta Ishak
Mailing Address 2301 Telestar Court
City: Falls Church State: VA Zip Code: 22042-1205
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 01 30 2004
Transaction ID: R1473707
Amount of Each Receipt this Period: 1000.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1808.00

TOTAL 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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. Mark D. Johnson, CLU, ChFC,
Mailing Address 199 Billings Dr
City: Superior State: WI Zip Code: 54880-4467
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01 05 2004
Transaction ID: R1473174
Amount of Each Receipt this Period: 250.00
Check

B.
Full Name (Last, First, Middle Initial)
Mr. Frederick W. Joyner
Mailing Address 8045 Glengarriff Road
City: Clemmons State: NC Zip Code: 27012
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2200.00
Date of Receipt: 01 26 2004
Transaction ID: R1473560
Amount of Each Receipt this Period: 2200.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Mr. Barry N. Koskow, CLU, JD
Mailing Address 6 Spearfields Lane
City: Lynnfield State: MA Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01 02 2004
Transaction ID: R1473088
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2700.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 17
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. Leon B. McClaflin
Mailing Address 98 Ocean Parkway
City: Ocean Pines State: MD Zip Code: 21811
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 01 26 2004
Transaction ID: R1473568
Amount of Each Receipt this Period: 225.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Mr. George Winger McCloy, CLU
Mailing Address 921 Chatham Lane #300
City: Columbus State: OH Zip Code: 43221-2418
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 01 13 2004
Transaction ID: R1473375
Amount of Each Receipt this Period: 500.00
Check

C.
Full Name (Last, First, Middle Initial)
Mr. Mark W. McGorry
Mailing Address 21 East 40th Street
City: New York State: NY Zip Code: 10016-0501
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 01 13 2004
Transaction ID: R1473388
Amount of Each Receipt this Period: 300.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1025.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 17
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. Frederick Vallette McNair, IV
Mailing Address 850B Deidre Terrace
City: Mc Lean State: VA Zip Code: 22101
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 01 02 2004
Transaction ID: R1473082
Amount of Each Receipt this Period: 500.00
Check

B.
Full Name (Last, First, Middle Initial)
Mr. Patrick J. Monaghan, CLU, ChFC
Mailing Address 555 Fairmount Ave.
City: Towson State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 01 30 2004
Transaction ID: R1473715
Amount of Each Receipt this Period: 450.00
Check

C.
Full Name (Last, First, Middle Initial)
Mr. Joseph R. Nienhaus, FLMI
Mailing Address 1800 Cedar Bend
City: Hartland State: WI Zip Code: 53029
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 01 28 2004
Transaction ID: R1473681
Amount of Each Receipt this Period: 300.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. John M. Qualy, CLU
Mailing Address 825 S. Skinker #1203
City: St. Louis State: MO Zip Code: 63105-2301
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 01 06 2004
Transaction ID: R1473252
Amount of Each Receipt this Period: 600.00
Check

B.
Full Name (Last, First, Middle Initial)
Mr. Reginald N. Rabjohns, CLU ChFC
Mailing Address 8700 West Bryn Mawr Ave Sbe 600 S.
City: Chicago State: IL Zip Code: 60631-3507
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 01 28 2004
Transaction ID: R1473658
Amount of Each Receipt this Period: 500.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Ms. Anne E. Sepera, CLU, ChFC
Mailing Address 115 Bellevue
City: Newton State: MA Zip Code: 02458
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01 05 2004
Transaction ID: R1473182
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1350.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr. Alexander S. Smith, LUTCF
Mailing Address 3331 Pennington Ln
City: Winston-Salem State: NC Zip Code: 27106
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 288.20
Date of Receipt: 01 14 2004
Transaction ID: R1473404
Amount of Each Receipt this Period: 288.20
Check

B.
Full Name (Last, First, Middle Initial)
Mr. Paul E. Vignone, CLU ChFC J
Mailing Address 214 Cedar Avenue
City: Allenhurst State: NJ Zip Code: 07711-1106
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01 12 2004
Transaction ID: R1473355
Amount of Each Receipt this Period: 250.00
Check

C.
Full Name (Last, First, Middle Initial)
Mr. R. David Wentz CLU,JD,ChF
Mailing Address 4500 W 89th Street Suite 200
City: Shawnee Mission State: KS Zip Code: 66207
FEC ID number of contributing federal political committee: C
Name of Employer: Self-employed
Occupation: Insurance Agent
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 01 05 2004
Transaction ID: R1473222
Amount of Each Receipt this Period: 300.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 838.20

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence Wiener, CLU

Mailing Address 3981 N. 32nd Terrace

City: Hollywood
State: FL
Zip Code: 33021-2022

FEC ID number of contributing federal political committee: C

Name of Employer: Self-employed

Occupation: Insurance Agent

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 01 09 2004

Transaction ID: R1473309

Amount of Each Receipt this Period: 500.00

Check

SUBTOTAL of Receipts This Page (optional) 500.00

TOTAL This Period (last page this line number only) 10871.20

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial)
First Union Bank

Mailing Address One First Union Center

City Charlotte | State NC | Zip Code 28288-1164

Purpose of Disbursement
Bank Charges

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D7541
Date of Disbursement 01 / 30 / 2004

Amount of Each Disbursement this Period
2867.08

B.
Full Name (Last, First, Middle Initial)
NAIFA

Mailing Address 2901 Telestar Court

City Falls Church | State VA | Zip Code 22042-1205

Purpose of Disbursement
Payroll,Benefits,postage,copier, etc

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D7591
Date of Disbursement 01 / 29 / 2004

Amount of Each Disbursement this Period
39253.82

C.
Full Name (Last, First, Middle Initial)
NAIFA

Mailing Address 2901 Telestar Court

City Falls Church | State VA | Zip Code 22042-1205

Purpose of Disbursement
Payroll.Benefits.Supplies,Postage.Copier

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D7542
Date of Disbursement 01 / 30 / 2004

Amount of Each Disbursement this Period
254055.08

, Utilities, etc

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **296175.98**

TOTAL This Period (last page this line number only) ..... ▶ **296175.98**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial): Christopher Cox Congressional Committee
Mailing Address: PO Box 8088-C
City: Newport Beach State: CA Zip Code: 92658
Purpose of Disbursement: Contr. Christopher Cox (CA-48-R-US
Candidate Name: Christopher Cox
Category/Type: House)
Office Sought: X House / Senate / President
State: CA District: 48
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D7503
Date of Disbursement: 01 14 2004
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): Cole for Congress
Mailing Address: PO Box 722256
City: Norman State: OK Zip Code: 73070
Purpose of Disbursement: Contr. Tom Cole (OK-4-R-US House)
Candidate Name: Tom Cole
Category/Type:
Office Sought: X House / Senate / President
State: OK District: 04
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D7502
Date of Disbursement: 01 13 2004
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Crowley for Congress
Mailing Address: 84-56 Grand Avenue
City: Elmhurst State: NY Zip Code: 11373
Purpose of Disbursement: Contr. Joseph Crowley (NY-7-D-US House)
Candidate Name: Joseph Crowley
Category/Type:
Office Sought: X House / Senate / President
State: NY District: 07
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D7506
Date of Disbursement: 01 16 2004
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5000.00

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

A.
Full Name (Last, First, Middle Initial): Holden for Congress
Mailing Address: 502 Walnut Street
City: Reading State: PA Zip Code: 19601
Purpose of Disbursement: Contr. Tim Holden (PA-17-D-US House)
Candidate Name: Tim Holden
Category/Type
Office Sought: X House / Senate / President
State: PA District: 17
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D7504
Date of Disbursement: 01 / 15 / 2004
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Hulshof for Congress
Mailing Address: PO Box 1621
City: Columbia State: MO Zip Code: 65205
Purpose of Disbursement: Contr. Kenny Hulshof (MO-9-R-US House)
Candidate Name: Kenny Hulshof
Category/Type
Office Sought: X House / Senate / President
State: MO District: 09
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D7513
Date of Disbursement: 01 / 30 / 2004
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Maloney for Congress
Mailing Address: 49 East 92nd Street
City: New York State: NY Zip Code: 10128
Purpose of Disbursement: Contr. Carolyn B. Maloney (NY-14-D-US
Candidate Name: Carolyn B. Maloney
Category/Type
Office Sought: X House / Senate / President
State: NY District: 14
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D7505
Date of Disbursement: 01 / 15 / 2004
Amount of Each Disbursement this Period: 3000.00
House]

SUBTOTAL of Disbursements This Page (optional) ..... ▶	6000.00
TOTAL This Period (last page this line number only) ..... ▶	11000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 / 17
FOR LINE NUMBER: (check only one)	9
	X 10

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NAIFA

Mailing Address 2901 Telestar Court

City: Falls Church State: VA ZIP Code: 22042-1205

Nature of Debt (Purpose):
Payroll,Benefits,postage,-copier, etc

Transaction ID: DD#7511

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
72855.38	0.00	39253.82	33601.56

1) **SUBTOTALS** This Period This Page (optional)	▶	33601.56
2) **TOTALS** This Period (last page this line number only)	▶	33601.56
3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)	▶	
4) **ADD 2)** and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	