



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		7999.03
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	63599.04									
(c) Total Receipts (from Line 19) .....	76000.00	152006.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	139599.04	160005.03								
7. Total Disbursements (from Line 31) .....	26762.22	47168.21								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	112836.82	112836.82								
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

TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	76000.00	152000.00
(i) Itemized (use Schedule A) .....	0.00	6.00
(ii) Unitemized .....	76000.00	152006.00
(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) .....	76000.00	152006.00
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)) .....	76000.00	152006.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	76000.00	152006.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	26762.22	46168.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	26762.22	46168.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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))..	26762.22	47168.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26762.22	47168.21

**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 .....	76000.00	152006.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	76000.00	152006.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26762.22	46168.21
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26762.22	46168.21

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

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

FOR LINE NUMBER: PAGE 6 / 28  
(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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

**A.** Full Name (Last, First, Middle Initial)  
Katharine C. Buckner  
Mailing Address PO Box 321  
City Basye State VA Zip Code 22810  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 10 / 08 / 2007  
Transaction ID: SA11AI.4278  
Amount of Each Receipt this Period 1000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Barbara Burri  
Mailing Address PO Box 1185  
City Jackson State WY Zip Code 83001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Precast, Inc. Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: SA11AI.4300  
Amount of Each Receipt this Period 1000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Vic Burri  
Mailing Address PO Box 1185  
City Jackson State WY Zip Code 83001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Precast, Inc. Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 30 / 2007  
Transaction ID: SA11AI.4298  
Amount of Each Receipt this Period 1000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**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 / 28

(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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

**A.**

Full Name (Last, First, Middle Initial)

Barry G. Campbell

Mailing Address 3398 Darby

City State Zip Code  
Keswick VA 22947

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.4306

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Margaretanne Campbell

Mailing Address 3398 Darby

City State Zip Code  
Keswick VA 22947

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.4307

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Beth Coakley

Mailing Address 5931 Little Falls Rd

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Pro Chain Solutions Director of Training

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.4244

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

**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 / 28  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

**A.** Full Name (Last, First, Middle Initial)  
Jim (Cornelius) Coakley  
Mailing Address 4960 Old Dominion Dr  
City Arlington State VA Zip Code 22207  
FEC ID number of contributing federal political committee. **C**  
Name of Employer C.J. Coakley Co. Occupation Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt MM / DD / YYYY 12 / 27 / 2007  
Transaction ID: SA11AI.4308  
Amount of Each Receipt this Period 5000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Michael D. Coakley  
Mailing Address 5931 Little Falls Rd  
City Arlington State VA Zip Code 22207  
FEC ID number of contributing federal political committee. **C**  
Name of Employer C.J. Coakley Co., Inc. Occupation Contractor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt MM / DD / YYYY 08 / 29 / 2007  
Transaction ID: SA11AI.4245  
Amount of Each Receipt this Period 2500.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
John Cooke  
Mailing Address 2503 Old Gate  
City San Antonio State TX Zip Code 78230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt MM / DD / YYYY 09 / 17 / 2007  
Transaction ID: SA11AI.4266  
Amount of Each Receipt this Period 5000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12500.00  
**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 9 / 28
	<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Nancy Cooke		Date of Receipt
	Mailing Address 2503 Old Gate		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Antonio	TX	78230
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.4292
Name of Employer Retired		Occupation Retired	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" value="5000.00"/>
			Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) George G. Daniels		Date of Receipt
	Mailing Address 526 Thorpe Rd		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Orlando	FL	32824
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.4274
Name of Employer Daniels Manufacturing Corp.		Occupation Executive	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" value="5000.00"/>
			Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew F. Dixon		Date of Receipt
	Mailing Address 1323 SE 17th St SE Ste 305		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Ft Lauderdale	FL	33316
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.4231
Name of Employer Ken Dixon Automotive		Occupation Executive	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" value="5000.00"/>
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> 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 / 28  
(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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Larry N. Francis

Mailing Address 38725 Bears Paw Dr

City State Zip Code  
Murrieta CA 92562

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

Name of Employer Occupation  
Self Employed Medical Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 7

**Transaction ID:** SA11AI.4289

Amount of Each Receipt this Period  
1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Ernestine B. George

Mailing Address PO Box 80769

City State Zip Code  
Lafayette LA 70598

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

Name of Employer Occupation  
Sidewinder Pumps Inc. Secretary/Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 0 / 2 0 0 7

**Transaction ID:** SA11AI.4302

Amount of Each Receipt this Period  
5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Scott Harding

Mailing Address 3633 Broadleaf Ct

City State Zip Code  
Glenwood MD 21738

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

Name of Employer Occupation  
F.B. Harding Inc. Electrical Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 7

**Transaction ID:** SA11AI.4212

Amount of Each Receipt this Period  
5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 28
	<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Gerry P. Harkins		Date of Receipt	
	Mailing Address 2285 Lithonia Industrial Blvd		M M / D D / Y Y Y Y Y 09 / 14 / 2007	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4265
	Lithonia	GA	30058	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		5000.00	
Name of Employer Southern Pan		Occupation President & CEO		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) David Kaye		Date of Receipt	
	Mailing Address 100 Forest Ave		M M / D D / Y Y Y Y Y 08 / 29 / 2007	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4246
	Rockville	MD	20850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer Self Employed		Occupation Attorney		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ken J. Legler		Date of Receipt	
	Mailing Address 2510 Williamsburg		M M / D D / Y Y Y Y Y 10 / 05 / 2007	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4276
	Pasadena	TX	77502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		5000.00	
Name of Employer Houston Wire Works		Occupation President		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11000.00
<b>TOTAL</b> 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 / 28

(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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Carlotta A. Lilly		Date of Receipt MM / DD / YYYY 08 / 31 / 2007		
	Mailing Address PO Box 772		<b>Transaction ID:</b> SA11AI.4256		
	City Basye	State VA	Zip Code 22810	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Retired		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jerlene M. McCall		Date of Receipt MM / DD / YYYY 08 / 29 / 2007		
	Mailing Address PO Box 723		<b>Transaction ID:</b> SA11AI.4254		
	City Harvey	State LA	Zip Code 70059	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Retired		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Ada Weiller		Date of Receipt MM / DD / YYYY 07 / 30 / 2007		
	Mailing Address 226 Center Ave		<b>Transaction ID:</b> SA11AI.4238		
	City Santa Rosa Beach	State FL	Zip Code 32459	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Homemaker		Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11000.00
<b>TOTAL</b> 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 / 28  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

**A.**

Full Name (Last, First, Middle Initial)  
William Weiller

Mailing Address 226 Center Ave

City State Zip Code  
Santa Rosa Beach FL 32459

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 30 / 2007

Transaction ID: SA11AI.4240

Amount of Each Receipt this Period  
5000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	76000.00

**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)

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<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

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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4235 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="07"/> <input type="text" value="10"/> / <input type="text" value="2007"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="4.50"/>
	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) American Express	Transaction ID: SB21B.4236 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="2007"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="221.25"/>
	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) American Express	Transaction ID: SB21B.4260 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="08"/> <input type="text" value="10"/> / <input type="text" value="2007"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="4.50"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="230.25"/>
<b>TOTAL</b> 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)

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<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4261 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="147.50"/>
	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) American Express	Transaction ID: SB21B.4272 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="4.50"/>
	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) American Express	Transaction ID: SB21B.4273 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="147.50"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="299.50"/>
<b>TOTAL</b> 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 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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4283 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="10"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="4.50"/>
	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) American Express	Transaction ID: SB21B.4284 Date of Disbursement
	Mailing Address PO Box 53733	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="147.50"/>
	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) Corporation Service Company	Transaction ID: SB21B.4229 Date of Disbursement
	Mailing Address 2711 Centerville Rd	<input type="text" value="07"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Wilmington State DE Zip Code 19808	Amount of Each Disbursement this Period
	Purpose of Disbursement Business Registration Services	<input type="text" value="319.00"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="471.00"/>
<b>TOTAL</b> 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 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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Edmonds Associates  Mailing Address 8221 Old Courthouse Rd Ste 204  City Vienna State VA Zip Code 22182  Purpose of Disbursement PAC DVD Reproduction 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.4249 Date of Disbursement 08 / 20 / 2007	Amount of Each Disbursement this Period 775.50
B.	Full Name (Last, First, Middle Initial) FTD.com  Mailing Address 3113 Woodcreek Dr  City Downers Grove State IL Zip Code 60515  Purpose of Disbursement PAC Flowers 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.4237 Date of Disbursement 07 / 18 / 2007	Amount of Each Disbursement this Period 161.98
C.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC  Mailing Address 901 N Washington St Ste 102  City Alexandria State VA Zip Code 22314  Purpose of Disbursement PAC Accounting Services 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.4252 Date of Disbursement 08 / 20 / 2007	Amount of Each Disbursement this Period 231.65

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

1169.13

**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 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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC	Transaction ID: SB21B.4253 Date of Disbursement 08 / 20 / 2007
	Mailing Address 901 N Washington St Ste 102	Amount of Each Disbursement this Period 305.15
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting Services	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC	Transaction ID: SB21B.4262 Date of Disbursement 09 / 06 / 2007
	Mailing Address 901 N Washington St Ste 102	Amount of Each Disbursement this Period 584.45
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting Services	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC	Transaction ID: SB21B.4268 Date of Disbursement 09 / 27 / 2007
	Mailing Address 901 N Washington St Ste 102	Amount of Each Disbursement this Period 291.50
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting Services	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1181.10
<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)

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<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC	Transaction ID: SB21B.4291 Date of Disbursement 11 / 13 / 2007
	Mailing Address 901 N Washington St Ste 102	Amount of Each Disbursement this Period 335.50
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting Services	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC	Transaction ID: SB21B.4295 Date of Disbursement 11 / 28 / 2007
	Mailing Address 901 N Washington St Ste 102	Amount of Each Disbursement this Period 372.25
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting Services	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Koch & Hoos LLC	Transaction ID: SB21B.4310 Date of Disbursement 12 / 28 / 2007
	Mailing Address 901 N Washington St Ste 102	Amount of Each Disbursement this Period 518.20
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Accounting Services	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1225.95
<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)

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4217 Date of Disbursement 07 / 12 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 1200.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4218 Date of Disbursement 07 / 12 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 6980.48
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4248 Date of Disbursement 08 / 18 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 4000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12180.48
<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)

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4263 Date of Disbursement 09 / 12 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 2400.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4280 Date of Disbursement 10 / 10 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 789.49
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Travel/Rm Rental	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4281 Date of Disbursement 10 / 10 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 2000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5189.49
<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)

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4294 Date of Disbursement 11 / 27 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 2200.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mari & Co. LLC	Transaction ID: SB21B.4311 Date of Disbursement 12 / 28 / 2007
	Mailing Address 501 Slaters Ln Ste 1105 Marina Towers	Amount of Each Disbursement this Period 1600.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement PAC Fundraising Consulting	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing	Transaction ID: SB21B.4233 Date of Disbursement 07 / 05 / 2007
	Mailing Address PO Box 6600	Amount of Each Disbursement this Period 112.00
	City Hagerstown State MD Zip Code 21741	
	Purpose of Disbursement PAC Credit Card Processing	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3912.00
<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)

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<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing	Transaction ID: SB21B.4234 Date of Disbursement
	Mailing Address PO Box 6600	<input type="text" value="07"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="19.95"/>
	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) Merchant Credit Card Processing	Transaction ID: SB21B.4258 Date of Disbursement
	Mailing Address PO Box 6600	<input type="text" value="08"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="104.00"/>
	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) Merchant Credit Card Processing	Transaction ID: SB21B.4259 Date of Disbursement
	Mailing Address PO Box 6600	<input type="text" value="08"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="0.55"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="124.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 28

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing <hr/> Mailing Address PO Box 6600 <hr/> City Hagerstown State MD Zip Code 21741 <hr/> Purpose of Disbursement PAC Credit Card Processing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: SB21B.4269 Date of Disbursement 09 / 04 / 2007 <hr/> Amount of Each Disbursement this Period 124.80
B.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing <hr/> Mailing Address PO Box 6600 <hr/> City Hagerstown State MD Zip Code 21741 <hr/> Purpose of Disbursement PAC Credit Card Processing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: SB21B.4270 Date of Disbursement 09 / 04 / 2007 <hr/> Amount of Each Disbursement this Period 112.00
C.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing <hr/> Mailing Address PO Box 6600 <hr/> City Hagerstown State MD Zip Code 21741 <hr/> Purpose of Disbursement PAC Credit Card Processing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: SB21B.4271 Date of Disbursement 09 / 04 / 2007 <hr/> Amount of Each Disbursement this Period 0.81

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	237.61
<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)

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing	Transaction ID: SB21B.4285 Date of Disbursement																			
	Mailing Address PO Box 6600	<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>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	4		2	0	0	7												
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Credit Card Processing	<table border="1"><tr><td>134.90</td></tr></table>	134.90																		
134.90																					
	Candidate Name	Category/Type																			
	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) Merchant Credit Card Processing	Transaction ID: SB21B.4287 Date of Disbursement																			
	Mailing Address PO Box 6600	<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>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	4		2	0	0	7												
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Credit Card Processing	<table border="1"><tr><td>104.00</td></tr></table>	104.00																		
104.00																					
	Candidate Name	Category/Type																			
	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) Merchant Credit Card Processing	Transaction ID: SB21B.4288 Date of Disbursement																			
	Mailing Address PO Box 6600	<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>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	4		2	0	0	7												
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Credit Card Processing	<table border="1"><tr><td>0.55</td></tr></table>	0.55																		
0.55																					
	Candidate Name	Category/Type																			
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>239.45</td></tr></table>	239.45
239.45		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 28

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing	Transaction ID: SB21B.4296 Date of Disbursement
	Mailing Address PO Box 6600	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="102.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing	Transaction ID: SB21B.4297 Date of Disbursement
	Mailing Address PO Box 6600	<input type="text" value="11"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="19.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Merchant Credit Card Processing	Transaction ID: SB21B.4312 Date of Disbursement
	Mailing Address PO Box 6600	<input type="text" value="12"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Credit Card Processing	<input type="text" value="0.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

**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)

PAGE 27 / 28

<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)  
TRUST IN SMALL BUSINESS POLITICAL ACTION COMMITTEE (TISB PAC)

A.

Full Name (Last, First, Middle Initial)  
Merchant Credit Card Processing

Transaction ID: SB21B.4313

Date of Disbursement

Mailing Address PO Box 6600

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	7

City Hagerstown State MD Zip Code 21741

Amount of Each Disbursement this Period

104.00
--------

Purpose of Disbursement  
PAC Credit Card Processing

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

104.00
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TOTAL This Period (last page this line number only) ..... ►

26687.36
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Image# 28990060437

Form/Schedule: **F3XN**

Transaction ID:

Koch & Hoos LLC services are inclusive of personnel and office overhead to include rent, supplies, telephone service, utilities, and office equipment. Committee management is provided on a volunteer basis. Additionally, all PAC administrative expenses are accurately reflected on the disclosure report and no expenses were incurred on behalf of a candidate or candidate committee, unless otherwise noted in this disclosure report.

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