

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
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

ADDRESS (number and street) 5910 Mineral Point Rd, PO Box 747
Mail Stop 5910 4 A2
 Check if different than previously reported. (ACC)
Madison WI 53701-0747

2. **FEC IDENTIFICATION NUMBER** C00402107
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 01 01 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 Christopher P. Roe

Signature of Treasurer Electronically Filed by Christopher P. Roe Date 04 09 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
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

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		28211.22
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	28211.22									
(c) Total Receipts (from Line 19)	6331.70	6331.70								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34542.92	34542.92								
7. Total Disbursements (from Line 31)	10000.00	10000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24542.92	24542.92								
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

CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

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	4498.70	4498.70
(i) Itemized (use Schedule A)	1833.00	1833.00
(ii) Unitemized	6331.70	6331.70
(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)	6331.70	6331.70
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))	6331.70	6331.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6331.70	6331.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9750.00	9750.00
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.....	250.00	250.00
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))..	10000.00	10000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	10000.00

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	6331.70	6331.70
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6331.70	6331.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.	Full Name (Last, First, Middle Initial) Larry H. Blanchard		Date of Receipt
	Mailing Address 491 North Calle Alvarado		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Palm Springs	CA	92262
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4452
Name of Employer CUNA Mutual Group		Occupation SVP, Special Projects	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="240.00"/>
		<input type="text" value="240.00"/>	\$40/biweekly

B.	Full Name (Last, First, Middle Initial) Michael T. Defnet		Date of Receipt
	Mailing Address 8315 Flagstone Drive		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Madison	WI	53719
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4447
Name of Employer CUNA Mutual Insurance Soc- iety		Occupation SVP, Distribution Support	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="300.00"/>
		<input type="text" value="300.00"/>	\$50/biweekly

C.	Full Name (Last, First, Middle Initial) David J. Griffiths		Date of Receipt
	Mailing Address 39W308 Baert Lane		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	St. Charles	IL	60175
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4446
Name of Employer CUNA Mutual Insurance Soc- iety		Occupation VP, Sales	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="210.00"/>
		<input type="text" value="210.00"/>	\$35/biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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

NAME OF COMMITTEE (In Full)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.

Full Name (Last, First, Middle Initial) Kevin T. Lentz		Date of Receipt
Mailing Address 1023 Carib Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
Verona	WI	53593
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4455
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 300.00
Name of Employer CUNA Mutual Insurance Society		Occupation
SVP, Member Products		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 300.00
<input type="checkbox"/> Other (specify) ▼		

\$50/biweekly

B.

Full Name (Last, First, Middle Initial) David P. Marks		Date of Receipt
Mailing Address 11 Richmond Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
West Hartford	CT	06117
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4480
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 1000.00
Name of Employer Members Capital Advisors		Occupation
EVP & Chief Investment Off.		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 1000.00
<input type="checkbox"/> Other (specify) ▼		

Check

C.

Full Name (Last, First, Middle Initial) Mark Martin		Date of Receipt
Mailing Address 1805 Autumn Hill Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
Verona	WI	53593
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4481
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer CUNA Mutual Group		Occupation
VP, P&C Claims		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 250.00
<input type="checkbox"/> Other (specify) ▼		

Check

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1550.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.	Full Name (Last, First, Middle Initial) John L. McWilliams		Date of Receipt MM / DD / YYYY 03 / 31 / 2008		
	Mailing Address 9719 Sandhill Road		Transaction ID: SA11AI.4469		
	City Middleton	State WI	Zip Code 53562	Amount of Each Receipt this Period 252.00	
	FEC ID number of contributing federal political committee. C		\$42/biweekly		
	Name of Employer CUNA Mutual Insurance Society	Occupation SVP, Human Resources	Aggregate Year-to-Date 252.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) James Metz		Date of Receipt MM / DD / YYYY 03 / 31 / 2008		
	Mailing Address 3908 Meridian Circle		Transaction ID: SA11AI.4475		
	City Verona	State WI	Zip Code 53593	Amount of Each Receipt this Period 240.00	
	FEC ID number of contributing federal political committee. C		\$40/biweekly		
	Name of Employer CUNA Mutual Group	Occupation SVP, Asset Management	Aggregate Year-to-Date 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Molly M. Nelson		Date of Receipt MM / DD / YYYY 03 / 31 / 2008		
	Mailing Address 2820 Osmundsen Rd		Transaction ID: SA11AI.4463		
	City Fitchburg	State WI	Zip Code 53711	Amount of Each Receipt this Period 240.00	
	FEC ID number of contributing federal political committee. C		\$40/biweekly		
	Name of Employer Members Capital Advisors	Occupation Chief Compliance Officer	Aggregate Year-to-Date 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	732.00
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 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.	Full Name (Last, First, Middle Initial) Faye Patzner		Date of Receipt
	Mailing Address 4473 Shooting Star Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Middleton	WI	53562
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4488
Name of Employer CUNA Mutual Group		Occupation SVP, Legal	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"/> 210.00
			\$35/biweekly

B.	Full Name (Last, First, Middle Initial) Christopher P. Roe		Date of Receipt
	Mailing Address 2 Hawk Feather Cir		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Madison	WI	53717
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4467
Name of Employer CUNA Mutual Insurance Soc- iety		Occupation VP, Special Projects	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"/> 300.00
			\$50/biweekly

C.	Full Name (Last, First, Middle Initial) Delania K. Truly		Date of Receipt
	Mailing Address 521 Sunset Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Hurst	TX	76054
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4456
Name of Employer CUNA Mutual Insurance Soc- iety		Occupation VP, South Region	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"/> 300.00
			\$50/biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 810.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.

Full Name (Last, First, Middle Initial)
Robert N. Trunzo

Mailing Address 1044 Willow Drive

City State Zip Code
Delafield WI 53018

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

Name of Employer
CUNA Mutual Insurance Society

Occupation
EVP & Chief Sales Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.70

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: SA11AI.4464

Amount of Each Receipt this Period
416.70

\$83.34/biweekly

B.

Full Name (Last, First, Middle Initial)
Gary Young

Mailing Address 1014 Winding Way

City State Zip Code
Middleton WI 53562

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

Name of Employer
CUNA Mutual Group

Occupation
VP, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2008

Transaction ID: SA11AI.4492

Amount of Each Receipt this Period
240.00

\$40/biweekly

SUBTOTAL of Receipts This Page (optional)	656.70
TOTAL This Period (last page this line number only)	4498.70

**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 11 / 14

<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

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)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.	Full Name (Last, First, Middle Initial) AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE	Transaction ID: SB23.4434
	Mailing Address 101 Constitution Ave. NW	Date of Disbursement MM / DD / YYYY 03 / 31 / 2008
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input 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: District:	

B.	Full Name (Last, First, Middle Initial) AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE	Transaction ID: SB23.4432
	Mailing Address 1130 Connecticut Avenue NW	Date of Disbursement MM / DD / YYYY 03 / 31 / 2008
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input 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: District:	

C.	Full Name (Last, First, Middle Initial) BARNEY FRANK FOR CONGRESS COMMITTEE	Transaction ID: SB23.4423
	Mailing Address PO Box 260	Date of Disbursement MM / DD / YYYY 03 / 31 / 2008
	City Newtonville State MA Zip Code 02460	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name BARNEY FRANK	Category/Type
	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: MA District: 04	

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

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)
CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.	Full Name (Last, First, Middle Initial) MOORE FOR CONGRESS	Transaction ID: SB23.4430
	Mailing Address PO BOX 14631	Date of Disbursement MM / DD / YYYY 03 / 31 / 2008
	City Shawnee Mission State KS Zip Code 66285	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DENNIS W MOORE	
	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: KS District: 03	

B.	Full Name (Last, First, Middle Initial) NAMIC PAC	Transaction ID: SB23.4436
	Mailing Address 3601 Vincennes Road	Date of Disbursement MM / DD / YYYY 03 / 31 / 2008
	City Indianapolis State IN Zip Code 46268	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input 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: District:	

C.	Full Name (Last, First, Middle Initial) PENNSYLVANIANS FOR KANJORSKI	Transaction ID: SB23.4424
	Mailing Address 103 South Hanover Street	Date of Disbursement MM / DD / YYYY 03 / 31 / 2008
	City Nanticoke State PA Zip Code 18634	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name PAUL E KANJORSKI	
	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: PA District: 11	

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)

PAGE 13 / 14

<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

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)

CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A. ROSKAM FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

ROSKAM FOR CONGRESS COMMITTEE

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
Contribution

Candidate Name
PETER ROSKAM

Office Sought: House
 Senate
 President

State: IL District: 06

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.4427

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

2000.00

B. TAMMY BALDWIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

TAMMY BALDWIN FOR CONGRESS

Mailing Address P.O. Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Fundraiser

Candidate Name
TAMMY BALDWIN

Office Sought: House
 Senate
 President

State: WI District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.4496

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ►

2250.00

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

9750.00

**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)

PAGE 14 / 14

<input 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 checked="" 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)

CUNA Mutual Insurance Society Political Action Committee (CUNA Mutual PAC)

A.

Full Name (Last, First, Middle Initial)

Tim Fox

Transaction ID: SB29.4440

Date of Disbursement

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

Mailing Address P.O. Box 1598

City Helena State MT Zip Code 59624

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution

--

Category/
Type

Candidate Name
Tim Fox

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MT District:

Special-Primary

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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

250.00
