

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
CMR Political Action Committee

ADDRESS (number and street) PO Box 2485
 Check if different than previously reported. (ACC)
Springfield VA 22152-0485

2. **FEC IDENTIFICATION NUMBER** C00469429
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 07 01 2009 through 12 31 2009

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 Robert F. Carlin
Signature of Treasurer Electronically Filed by Robert F. Carlin Date 01 30 2010

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
CMR Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9	<table border="1"><tr><td>0.00</td></tr></table>	0.00	<table border="1"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	9									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1"><tr><td>55000.00</td></tr></table>	55000.00	<table border="1"><tr><td>55000.00</td></tr></table>	55000.00								
55000.00												
55000.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1"><tr><td>55000.00</td></tr></table>	55000.00	<table border="1"><tr><td>55000.00</td></tr></table>	55000.00								
55000.00												
55000.00												
7. Total Disbursements (from Line 31)	<table border="1"><tr><td>39358.60</td></tr></table>	39358.60	<table border="1"><tr><td>39358.60</td></tr></table>	39358.60								
39358.60												
39358.60												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1"><tr><td>15641.40</td></tr></table>	15641.40	<table border="1"><tr><td>15641.40</td></tr></table>	15641.40								
15641.40												
15641.40												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
CMR Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	35000.00	35000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	35000.00	35000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	20000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	55000.00	55000.00
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))	55000.00	55000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	55000.00	55000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1358.60	1358.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1358.60	1358.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38000.00	38000.00
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))..	39358.60	39358.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39358.60	39358.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	55000.00	55000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55000.00	55000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1358.60	1358.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1358.60	1358.60

**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"/> 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)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Cowles	Date of Receipt MM / DD / YYYY 12 / 23 / 2009
	Mailing Address 2506 S Boxwood Lane	Transaction ID: SA11AI-27-11-c
	City State Zip Code Spokane WA 99223-4938	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer none	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Mr. David Bassford	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 6720 Fort Dent Way Suite 230	Transaction ID: SA11AI-33-16-c
	City State Zip Code Tukwila WA 98188-2589	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Money Tree, Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Wanda Cowles	Date of Receipt MM / DD / YYYY 12 / 23 / 2009
	Mailing Address 2506 S Boxwood Lane	Transaction ID: SA11AI-28-12-c
	City State Zip Code Spokane WA 99223-4938	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
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	

SUBTOTAL of Receipts This Page (optional)	15000.00
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 / 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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Mr. Hoyt Larison</p> <p>Mailing Address 12021 N Vistawood Court</p> <p>City State Zip Code Spokane WA 99218-2968</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 3 / 2 0 0 9</p> <p>Transaction ID: SA11AI-29-13-c</p> <p>Amount of Each Receipt this Period 5000.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. Dennis Bassford</p> <p>Mailing Address 6720 Fort Dent Way Suite 230</p> <p>City State Zip Code Tukwila WA 98188-2589</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Money Tree, Inc. Occupation Owner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: SA11AI-34-17-c</p> <p>Amount of Each Receipt this Period 5000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Rufus Lumry</p> <p>Mailing Address 305 111th Avenue NE # B</p> <p>City State Zip Code Bellevue WA 98004-5875</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Acorn Ventures Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 0 9</p> <p>Transaction ID: SA11AI-35-18-c</p> <p>Amount of Each Receipt this Period 5000.00</p>
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SUBTOTAL of Receipts This Page (optional)	15000.00
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 / 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"/> 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) CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mrs. Patricia Lumry		Date of Receipt																				
Mailing Address 305 111th Avenue NE # B		<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>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	3		2	0	0	9													
City	State	Zip Code																				
Bellevue	WA	98004-5875																				
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI-36-19-c																				
C		Amount of Each Receipt this Period																				
		5000.00																				
Name of Employer none	Occupation homemaker																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																					
	5000.00																					

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	35000.00

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

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

FOR LINE NUMBER: PAGE 9 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Honeywell International Political Action Committee

Mailing Address 101 Constitution Avenue NW
Suite 500

City State Zip Code
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11C-32-15-c

Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
American College Of Radiology Association Political Action Committee

Mailing Address 1891 Preston White Drive

City State Zip Code
Reston VA 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
12 / 23 / 2009

Transaction ID: SA11C-19-8-c

Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Build Political Action Committee Of The National Association Of Home Builders (buildpac)

Mailing Address 1201 15th Street NW

City State Zip Code
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
12 / 23 / 2009

Transaction ID: SA11C-25-10-c

Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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 10 / 14
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial) Pricewaterhousecoopers Political Action Committee I		Date of Receipt																				
Mailing Address 1301 K Street NW Suite 800W		<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>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	3		2	0	0	9													
City	State	Zip Code																				
Washington	DC	20005-3317																				
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-21-9-c																				
C C00107235		Amount of Each Receipt this Period																				
		5000.00																				
Name of Employer	Occupation																					
Receipt For:	Aggregate Year-to-Date ▼																					
<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼	5000.00																					

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	20000.00

**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 11 / 14

<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)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Concentric Office, LLC		Transaction ID: SB21B-37-20-e	
	Mailing Address 8136 Old Keene MI Road Suite A300		Date of Disbursement 12 / 31 / 2009	
	City Springfield	State VA	Zip Code 22152-1853	Amount of Each Disbursement this Period 1358.60
	Purpose of Disbursement Administration & Compliance fee		001	
	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:			

SUBTOTAL of Disbursements This Page (optional) ▶

1358.60

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

1358.60

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Charlie Dent For Congress <hr/> Mailing Address PO Box 442 <hr/> City Allentown State PA Zip Code 18105-0442 <hr/> Purpose of Disbursement Political Contribution: <input type="checkbox"/> 011 Candidate Name Charles W Rep Dent <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 15	Transaction ID: SB23-12-4-e Date of Disbursement 12 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00	
	B. Full Name (Last, First, Middle Initial) Tiberi For Congress <hr/> Mailing Address 2931 E Dub Granvl Road Suite 190 <hr/> City Columbus State OH Zip Code 43231-2098 <hr/> Purpose of Disbursement Political Contribution: <input type="checkbox"/> 011 Candidate Name Patrick J. Tiberi <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 12	Transaction ID: SB23-18-7-e Date of Disbursement 12 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
	C. Full Name (Last, First, Middle Initial) Lee Terry For Congress <hr/> Mailing Address PO Box 540098 <hr/> City Omaha State NE Zip Code 68154-0098 <hr/> Purpose of Disbursement Political Contribution: <input type="checkbox"/> 011 Candidate Name Lee Terry <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NE District: 02	Transaction ID: SB23-14-5-e Date of Disbursement 12 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00

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)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Tom Rooney For Congress</p> <p>Mailing Address 2336 SE Ocean Boulevard # 313</p> <p>City Stuart State FL Zip Code 34996-3319</p> <p>Purpose of Disbursement Political Contribution: 011 Category/ Type</p> <p>Candidate Name Tom Rooney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 16</p>	<p>Transaction ID: SB23-10-3-e Date of Disbursement <table border="1" style="width: 100%;"> <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>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	9	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	9	/	2	0	0	9													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) National Republican Congressional Committee</p> <p>Mailing Address 320 1st Street SE</p> <p>City Washington State DC Zip Code 20003-1838</p> <p>Purpose of Disbursement Political Contribution: 011 Category/ Type</p> <p>Candidate Name National Republican Congressional Committee</p> <p>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 checked="" type="checkbox"/> Other (specify) ▼ Retire Debt - State: District:</p>	<p>Transaction ID: SB23-6-1-e Date of Disbursement <table border="1" style="width: 100%;"> <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>2</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">30000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	0	/	2	0	0	9	30000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	3	0	/	2	0	0	9													
30000.00																						
<p>C. Full Name (Last, First, Middle Initial) Mary Bono Mack Committee</p> <p>Mailing Address PO Box 3370</p> <p>City Palm Springs State CA Zip Code 92263-3370</p> <p>Purpose of Disbursement Political Contribution: 011 Category/ Type</p> <p>Candidate Name Mary Bono Mack</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 45</p>	<p>Transaction ID: SB23-8-2-e Date of Disbursement <table border="1" style="width: 100%;"> <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>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	9	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	9	/	2	0	0	9													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	32000.00
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 14 / 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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Friends Of Dave Reichert

Transaction ID: SB23-31-14-e
Date of Disbursement

Mailing Address PO Box 53322

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	9

City Bellevue State WA Zip Code 98015-3322

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Political Contribution:

011
Category/ Type

Candidate Name
Dave Reichert

Office Sought: House Senate President
State: WA District: 08
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Lynn Jenkins For Congress

Transaction ID: SB23-16-6-e
Date of Disbursement

Mailing Address PO Box 1441

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	9

City Topeka State KS Zip Code 66601-1441

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Political Contribution:

011
Category/ Type

Candidate Name
Lynn Jenkins

Office Sought: House Senate President
State: KS District: 02
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

38000.00
