28039684434

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED FEC MAIL CENTER

2008 APR 15 AM 10: 31:

FORM 3X	For O	ther Than	An Authori	zed Comm	nittee	1.	Office 1	Jee Only	
1. NAME OF COMMITTEE (in full)	TYPE	OR PRINT ▼		Example: If over the line		12FE	en de la companya de		,
ADDRESS (number and street)			1.1. f. 1. a. g. H			<u>ω, ', C</u>	7, MM 1, 4	+00	
Check If different than previously reported. (ACC)		ndso		444	لبب	CT	060		
CO04228		* -	3. IS THE	- : /	NEW (N) OF	STATE	AMENDED (A)	ZIP COL)E A
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (July 15 Quarterly Report (October 15 Quarterly Report (Jerusny S1 Year-End Report (July S1 Mid-Year Report (Non-election of the content of the c	Q1) (d) (d)	PRE-Elect Report for 30-Day POST-Elect Report for	Election on	Primary (1 Convention	(120)	Gene Speci	(30R)	in the State of	Nov 20 (M11) (Non-Excitor) Veer Crist) Dec 20 (M12) (Non-Excitor) Veer Crist) Jan 31 (YE) Runoff (12R)
certify that I have examined the			est of my kno	through			Account and complete.		
ype or Print Name of Treasure	Mu	half:	Top9)		eate 4			7
OTE: Submission of false, errors	ous, or in	complete infon	mation may s	ubject the per	son signing th	is Report to	FEC F		

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SHMMARY DAGE

FEC Form 3X (Rev.	02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee N Alston PA	ame CINC -	Political Action	Commettee
Report Covering the Period	: From:	1 01 2008	To: 3 3/ 2008
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	2008		293557
(b) Cash on Hand at Beginning of Report	ng Period	293557	
(c) Total Receipts (from	Line 19)	and a star florida about the development of	ne for the Abertapier Besteville Hear
(d) Subtotal (add Lines (6(c) for Column A an 6(a) and 6(c) for Col	d Lines	a 9 3557	293557
7. Total Disbursements (from	Line 31)	10.5090	1.050.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line		1.8.8.4.6.7	188467
Debts and Obligations Ow the Committee (Itemize all Schedule C and/or Schedule	on f		·
10. Debts and Obligations Ow the Committee (Itemize all Schedule C and/or Schedu	on [
This committee has qui	alified as a multicand	idate committee. (see FEC FORM 1M)	
	Fo	r further information contact:	
	F	Federal Election Commission 999 E Street, NW Washington, DC 20463	·
		Toll Free 800-424-9530 Local 202-894-1100	

DETAILED SUMMARY PAGE of Receipts

		FEC Form 3X (Rev. 08/2004)	•	Page 3
	Write	or Type Committee Name Alson PAC-FILL	- Political Action	Committee
	Report	Covering the Period: From:	01 01 2008	3 31 2008
		I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11		stributions (other than loans) From:		
	(a)	Individuals/Persons Other		
		Than Political Committees	From the first of the control of the state o	ensitement or transferred authoristic schrondisses
		(i) Itemized (use Schedule A)		
		(ii) Uniternized		
		(N) TOTAL (add		
		Lines 11(a)(i) and (ii)		
	(b)	Political Party Committees		
	(c)	Other Political Committees .		
	•	(such as PACa)	incert : makes ellered use book them brook and the colored	and make the standard and make attendard
		Total Contributions (add Lines		
		11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)		
10		Isfers From Affiliated/Other		
12	•	y Committees		
13.	, All L	oans Received		
			Special states in the strip seed by a suppression of the state of the	Similar Signatural real records and analysis of the second
14.	Loan	Repayments Received		
15.	Offee	ets To Operating Expenditures	Paradientel-raffin d'ancierraffitation au bandin adiquel	James Connections of Microside country of Styles and Assembly unglished a formal.
	•	unds, Rebates, etc.)		Instruction of the second section of
		ry Totals to Line 37, page 5)		
16.		nds of Contributions Made Idenal Candidates and Other		
		cal Committees		
17		r Federal Receipts		
17.		lends, interest, etc.)		
18.		stera from Non-Federal and Levin Fund	B Indepted and the Indepted and the Indepted	
	(a) N	on-Federal Account	taged-undereducadated-partners/resolventereducad	
	((from Schedule H3)		
	(b) Le	evin, Funds (from Schedule H5)		
				
	(c) To	otal Transfers (add 18(a) and 18(b))		
19.	Total	Receipts (add Lines 11(d),	Secure de la company de la com	Lastradorolpadorolpa desclassivo descrisori
	12, 13	3, 14, 15, 16, 17, and 18(c))▶		_
20.		Federal Receipts		
	(aubtri	act Line 18(c) from Line 19)		

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	. O(a)	perating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4)	grand of the company of the configuration of the co	The second secon
		(i) Federal Share	ร์ 2 สมบาท พระวังคม กรี แกรส่วน เกรเขา คลสี และกัดสะบางและกรี รี ขาก และกรี วุล รากการราช เกรเขา เหมู่หาวสุดเหมู่ เกรเขาสมบุทธิบังสุดเกรเมณฑาสุด และกรุ่งกรเม่น	en er er kunste ste er klimer i ste er klimer i de r ste klimer klimer klimer klimer. George ste er grant gen ste grant klimer klimer klimer klimer klimer klimer klimer.
		(ii) Non-Federal Share	and the second s	
	(b)	Other Federal Operating	and the second s	in a significant programme of the control of the co
		Expenditures Bank 26.90, Film 25	50.90	in all the state of the state o
	(c)	Total Operating Expenditures	ుంది. రెక్ట్ కొన్న నిట్టుండుకున్నాడిను ప్రవేశంత్వికుండి క్రైమిగా ప్రాక్టించిన కట్టులు సిట్టికుండు త్వామి. సిన్ 	The state of the series of the
		(add 21(a)(i), (a)(ii), and (b)) ► Insters to Affiliated/Other Party	Committee and any office of the selection of the selectio	interest militarità e famillarità e situati
22.		mnittees		And the second s
23.	Č	ntributions to		خادك بالبداد كساد كاستان بالبداد
	Fe	deral Candidates/Committees d Other Political Committees	1000 -	100000
24.		ependent Expenditures		Promise of the Control of the Contro
		e Schedule E)ordinated Party Expenditures		
25.	(2	U.S.C. 6441a(d))		in dan de
	(ua	Schedule F)	The second secon	en e
26.	Loc	n Repayments Made		
			I was an in the second	
27. 28.	Los	ins Made iunds of Contributions To:		
		individuals/Persons Other Than Political Committees		
		Man Foldcai Continuess	أسلم المسلم المسامر ال	
	ſΔ\	Political Party Committees		
		Other Political Committees	the state of the s	Terretine and the state of the
	17	(such as PACe)		
		•	limentes atomether disember demonstration of the estercal	riness besorte additional mandet additional to an additional format
	(d)	Total Contribution Refunds	hendendundundundundundundundund	
		(add Lines 28(a), (b), and (c))▶		
_		-1.		
9.	Om	er Disbursemente		
0.	Fed	eral Election Activity (2 U.S.C. §431(20))		
		Allocated Federal Election Activity		
	•	(from Schedule H6)	ben trust unterstructuraturaturaturaturatura	Seatter de marche de contraction de la contracti
		(i) Federal Share		
			Sandan Sandan Sandan Sandan Sandan Sandan Sandan	Andreader designations of the second
		(ii) "Levin" Share		
	(b)	Federal Election Activity Paid Entirely	Later designation of the later	
		With Federal Funds		
	(c)	Total Federal Election Activity (add		
		Lines 30(a)(i), 30(a)(ii) and 30(b))▶	han de sandre de la company de	
,	Thial	Disbursements (add Lines 21(c), 22,		·
		24, 25, 26, 27, 28(d), 29 and 30(c))	tendente alemante de contracte de la contracte	Section of such confined and such such such such such such such such
	, 4		1050.90	1.0.50.90
2	Total	Federal Disbursements		•
_		tract Line 21(a)(ii) and Line 30(a)(ii)		
		Line 31)		
			·	

Γ	FEC Form SX (Rev. 02/2003)	DETAILED SUMMARY PAGE of Disbursements	Page 5
111	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)	و خفه من دختار منجاح تفسيتهمين بند دورسانه ربعت تيرسته بهداده وهداده	الله المنتقد الله المراجعة المراجعة المنتقد المنتقدين الشائم (المعسى المعالي). وإن المنتقد الله إلى المراجعة المنتقد المنتقد المنتقدين الشائم (المنتقد المنتقد المنتقد المنتقد المنتقد المنتقد
34.	Total Contribution Refunds (from Line 28(d))	in and a main or Mineral to the factor Mineral and the Mineral and a factor of the fac	in alternation of the above two with the course of the amount of the amo
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	The angular of the first the common and the second of the common of the	Carried and the Commission of
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	Contract the second state of the second state	A CANAL OF THE A POSSESS OF THE PROPERTY OF THE APPLICATION OF THE APP
37 .	Offsets to Operating Expenditures (from Line 15, page 3)	And the second of the second o	
38.	Net Operating Expenditures		

SCHEDULE A (FEC Form 3X	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any pe the name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	c - Political Action	Cammi Hee
Full Name (Last, First, Middle Initial) A.		Date of Receipt
Melling Address		The state of the s
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation]
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date V	
Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		المنتبيل التنا المنا
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C made matter after a sky material increases	The state of the s
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	area barelando decretos libraterola di la la la constante
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	
TOTAL This Period (last page this line number of	only)	

					•		
_	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NE NUMBER:	PAGE OF		
ľ	TEMIZED DISBURSEMENTS	for each category of the	· '	only one) 1b 22 23]24 []25 []2		
'	•	Detailed Summary Page	Hz		29c 29 3		
Γ	Any information copied from such Reports and State	ements may not be sold or use	d by any p	erson for the purpose of s	soliciting contributions		
Ŀ	or for commercial purposes, other than using the n	ame and address of any political	et committee	e to solicit contributions fro	om such committee.		
ľ	NAME OF COMMITTEE (III Full)	O(1)	1 1	1	d a		
	HIStom PAC INC Full Name (Last, First, Middle Initial)	_ Political	140	CTION- COMO	ttee		
A	A	ainm D		Date of Disburseme			
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	PO.BM 24804, 651 E FO		200	transmin it wasted	THE SHOPP OF SHIP SHIP		
	ChaHanoosa, TN	State Zip Code 37422					
	Purpose of Disbursement	1	011	Amount of Each Die	bursement this Period		
	readdele Neme	, -	Category/	Searchmarks and research to the			
	Zachan- WAM	ment For:	Туре	- Indiana de alle de la compansión de la	1.000		
	Senate Diameter	Primary (General					
	State: TN District: 3	Other (specify)		,			
_	Full Name (Last, First, Middle Initial)			Date of Disbursemen			
В.	·			Date of Disbursemen	, [7777] 		
	Mailing Address						
	City	State Zip Code					
	Purpose of Disbursement	· ·	esta se tand	1			
	Candidate Name	<u> </u>	أحسي	Amount of Each Disbursement this Period			
			Category/ Type				
	Office Sought: House Disburse	nent For: Primary General		7			
	President	Other (specify)					
	State: District:	•					
C.	Full Name (Last, First, Middle initial)			Date of Disbursement			
C.		· · · · · · · · · · · · · · · · · · ·			******		
	Mailing Address						
	City	tate Zip Code					
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		Primary General Other (specify) 🔻	. /				
	State: District:	1- F					

SUBTOTAL of Disbursements This Page (optional).

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

SCHEDULE C (FEC Form 3X)	
LOANS	Use separate schedule(s) PAGE OF for each category of the
	Detailed Summary Page FOR LINE 13 OF FORM 3X
Alston PAC JUL- Political Participation of Committee (in Full)	Hial Action Committee
LOAN SOURCE Full Name (Last, First, Middle Initial) Mailing Address	Election: Primary General Other (specify)
City State ZIP C	iode
Original Amount of Loan Cumulative Payment 1	o Date Balance Outstanding at Close of This Perior
Date Incurred Date Due D	Interest Rate Secured: % (apr) Yes No
Full Name (Last, First, Middle Initial)	Name of Employer
Malling Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Z. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Gueranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailling Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
City City City	Outstanding:
BUSTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	
Carry outstanding belance only to LINE 3, Schedule D, for this line. If n	o schools u, carry forward to appropriate line or summary.

SCHEDULE C-1 (FEC Form 3X) Supplementary for LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS Information found on of Schedule C Federal Election Commission, Washington, D.C. 20463 Committee NAME OF COMMITTEE (In Full) **FEC IDENTIFICATION NUMBER** C 004228 LENDING INSTITUTION (LENDER) Amount of Loan Interest Rate (APR) Full Name Mailing Address Date incurred or Established State Zip Code **Date Due** City A. Has loan been restructured? No If yes, date originally incurred B. If line of credit, **Total Outstanding** Amount of this Draw: Balance: C. Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C.) ☐ Yes D. Are any of the following pledged as collateral for the loan: real estate, personal What is the value of this collateral? property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected security interest in it? No Yes E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? No Yes If yes, specify: Location of account: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: Date account established: City. State, Zio:

Attach a signed copy of the loan agreement.

G. COMMITTEE TREASURER

Typed Name Signature

TO BE SIGNED BY THE LENDING INSTITUTION:

To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

F. If neither of the types of collateral described above was piedged for this loan, or if the amount piedged does not equal or exceed

the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

- The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware of the requirement that a lost must be made on a basis which assures repayment, and has

complied with the requirements set forth at	11 CFR 100.82 and 100.142 in maidin	g this loan.
AUTHORIZED REPRESENTATIVE		DATE
Typed Name		TEVET / POUT / PARTY
Signature	Title	4 0 0 1 1 1 1 1 1

DATE

SCHEDULE D (FEC Form 3X)	(Use separate	PAGE OF
DEBTS AND OBLIGATIONS	achedule(s)	FOR LINE NUMBER:
Excluding Loans	for each numbered line)	(check only one) 9
Alston PAC TUC-Plittiel Act	ton Comm	Hee
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of De	Balance at Close of This Period
City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstanding	Balance at Close of This Paliod
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address	Nature of Debi	
City State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstanding E	lalance at Close of This Period
1) SUBTOTALS This Period This Page (optional)	<u> </u>	+++++
TOTALS This Period (last page this line number only)	<u>}</u>	++++++
i) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)) >	

NAME OF COMMITTEE (In Full State Control of Payers	SCHEDULE	E (FEC Form 3X	·.			· · ·:	· ••·
Name Category Ca	ITEMIZED INDI	EPENDENT EXPENDI	TURES				
Check If 24-hour notice 48-hour notice 148-hour notice 15 24-hour notice 16 32-hour notice 17 24-hour notice 16 32-hour notice 17 24-hour notice 17 24-hour notice 18 32-hour notice 18 32-hou						FOR LI	NE 24 OF FORM 3X
Check II	NAME OF COMM		NITE	/ 1.1.	11		
Calendar Year-To-Date Per Bection City State Zip Code Calendar Year-To-Date Per Bection City Ci	Alston	I HAK SENC	tolitio	u tection con	mi Hee		
Mailing Address Amount City State Zip Code Purpose of Expenditure Name of Federal Candidate Supported or Opposed by Expenditure: Calendar Yten-To-Date Per Bection for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Purpose of Expenditure City State Zip Code Category Date Category Disbursement For: Primary Ganeral City State Zip Code Category Mailing Address Amount City State City State City State City State City State City Code Category Office Sought: President Check One: Support Ganeral City City State City State City City Code Category Office Sought: Check One: Static: City	Check if	24-hour notice 48-h	our notice			i sou in ord at colour i	
Mailing Address City State Zip Code Purpose of Expenditure Category' Type Sanate Det. or. Name of Federal Candidate Supported or Opposed by Expanditure: Check One: Support Copose Calendar Year-To-Date Per Election for Office Sought State Zip Code City State Zip Code City State Zip Code Category' State Determine (Last, First, Middle Initial) of Payee Mailing Address Amount City State Zip Code Category' State District: Purpose of Expenditure Category' State District: President Check One: Support Category' Senate District: Check One: Support Category' Category' Check Cone: Support Category' Check Cone: Support Category' Check Cone: Support Category' Check Cone: Support Category' Category' Category' Check Cone: Support Category' Cat	Full Name (La	st, First, Middle Initial) of Po	RY86		Date		
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Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Mailing Address		•	•	Type	<u>ij</u>	Senate	Dist.ict.
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Name of Federal Candidate Supported or Opposed by Expenditure: Calendar Year-To-Date Par Election	<u> </u>			<u></u>	l orania		
Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Spose Calender Year-To-Date Per Election Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Under pensity of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political	Purpose of Exp	anciture .	•	I Time i	Omce Sougi		~
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of itemized independent Expenditures (b) SUBTOTAL of Unitermized independent Expenditures (c) TOTAL independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political		- Barrildata Supported on (Sanarad by Evenand	The Market Strategy	1	Н	
Calendar Year-To-Date Par Election for Office Sought	Name of Federa	II Candidate Supported or C		wy:	Check One:		
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(a) SUBTOTAL of itemized independent Expenditures	Calendar Y		4.4.4	· · · · · · · · · · · · · · · · · · ·			y 🔚 General 📗
(b) SUBTOTAL of Uniterrized Independent Expenditures		for Office Sought				ner (specify) > _	
(b) SUBTOTAL of Uniterrized Independent Expenditures				· · · · · · · · · · · · · · · · · ·			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political	(a) SUBTOTAL o	if Itemized Independent Exp	enditures	5 P44 6 0 24 0 14 0 14 0 14 0 14 0 14 0 14 0 14	. •		
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with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political							3 2 2 2
party committee) any political party committee or its agent.	with, or at the req	uest or suggestion of, any	candidate or authoriz	es reported herein were r red committee or agent of	not made in co either, or (If th	operation, consult e reporting entity	etion, or concert is not a political
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Signature

	CHEDULE F (FEC Form							
	TEMIZED COORDINATED PA							
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE						PAGE OF		
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)					FOR LINE 25 OF FOR	M 3X		
Alston PAC EUC - Political Action Commit						Check if		
α	Has your committee been designated to make coordinated expenditures by a political party committee? YES							
	·		ty .		Stat	e ZIP Code		
	Full Name (Last, First, Middle Initial) o	f Each Payetin			Purpose of Expa	Categ		
	L:				Date			
	City	State	Zip Code	•	1			
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	SUBTOTAL of Expenditures This Page (optional)							
_	TAI This Reday (lest none this line num	her only)				- Annahamenta	11	

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)					
USE ONLY ONE SECTION, A or B					
A. State and Local Party Committees					
Fixed Percentage (select one)					
Presidential-Only Election Year (28% Federal)					
Presidential and Senate Election Year (36% Federal)					
Senate-Only Election Year (21% Federal)					
B. Separate Segregated Funds and Nonconnected Committees					
Flat Minimum Federal Percentage					
If the committee will allocate using the flat minimum percentage of 50% federal funds, check $lacksquare$					
If the committee is spending more than 50% federal funds, indicate ratio below					
Federal%					
Nonfederal%					
This ratio applies to (check all that apply):					
Administrative Generic Voter Drive Public Communications Referencing Party Only					

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered **Postmarked USPS First Class Mail** . Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping/Date 4/14/98 fed & Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATÉ PREPARED