



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CMR Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		15641.40
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	35902.54									
(c) Total Receipts (from Line 19) .....	38000.00	180445.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	73902.54	196086.40								
7. Total Disbursements (from Line 31) .....	47120.00	169303.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	26782.54	26782.54								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
CMR Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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) .....	13500.00	100900.00
(ii) Unitemized .....	0.00	5.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13500.00	100905.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	24500.00	79540.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	38000.00	180445.00
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)) .....	38000.00	180445.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	38000.00	180445.00

## 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.....	5620.00	12403.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5620.00	12403.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37500.00	136000.00
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.....	4000.00	20900.00
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))..	47120.00	169303.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47120.00	169303.86

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	38000.00	180445.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38000.00	180445.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5620.00	12403.86
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5620.00	12403.86

**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 / 23
	<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)  
**CMR Political Action Committee**

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David Bassford	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 6720 Fort Dent Way Suite 230	<b>Transaction ID:</b> SA11AI-33-195-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. <b>C</b>	
	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	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Robin Denison	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 6720 Fort Dent Way Suite 230	<b>Transaction ID:</b> SA11AI-314-194-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. <b>C</b>	
	Name of Employer Money Tree Inc. Occupation Attorney 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) Mr. James Derderian	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1325 Pennsylvania Avenue NW Suite 700	<b>Transaction ID:</b> SA11AI-325-229-c
	City State Zip Code Washington DC 20004-1705	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Stanton Park Group LLC Occupation Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11000.00</b>
<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: <span style="float: right;">PAGE 7 / 23</span>	
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Frederick Paup		Date of Receipt																				
	Mailing Address 26032 SE 30th Street		<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>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	0		0	1		2	0	1	0													
	City	State	Zip Code																				
	Sammamish	WA	98075-9107																				
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI-334-245-c																					
C		Amount of Each Receipt this Period																					
Name of Employer Manson Construction Co.		Occupation Executive Vice President																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		2500.00																					
<input type="checkbox"/> Other (specify) ▼																							
Aggregate Year-to-Date ▼		2500.00																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	13500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23  
(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)  
Automotive Free International Trade Pac

Mailing Address 1625 Prince Street  
Suite 225

City State Zip Code  
Alexandria VA 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

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 0 / 1 4 / 2 0 1 0

**Transaction ID:** SA11C-319-203-c

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Farm Credit Council Political Action Committee

Mailing Address 50 F Street NW  
Suite 900

City State Zip Code  
Washington DC 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

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 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA11C-201-231-c

Amount of Each Receipt this Period  
2500.00

**C.** 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  
M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 1 0

**Transaction ID:** SA11C-32-204-c

Amount of Each Receipt this Period  
5000.00

**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: PAGE 9 / 23

(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)  
National Association Of Mutual Insurance Companies Pac

Mailing Address PO Box 68700

City State Zip Code  
Indianapolis IN 46268-0700

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11C-326-230-c

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Political Action Committee Of The American Association Of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue NE  
Floor 1

City State Zip Code  
Washington DC 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11C-327-232-c

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Prosperity Pac

Mailing Address 1006 Pendleton Street

City State Zip Code  
Alexandria VA 22314-1837

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11C-329-234-c

Amount of Each Receipt this Period

2500.00

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

9500.00

**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 / 23  
(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)  
Union Pacific Corp. Fund For Effective Government

Mailing Address 600 13th Street NW  
Suite 340

City State Zip Code  
Washington DC 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11C-328-233-c

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	24500.00

**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 / 23

<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)  
Dawn Sugasa

Mailing Address 665 Hall Road

City State Zip Code  
Colville WA 99114-9745

Purpose of Disbursement  
Fundraising: Finance Consulting

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-108-202-e  
Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

5440.00

SUBTOTAL of Disbursements This Page (optional) ▶

5440.00

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

5440.00

# 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)

<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) Austin Scott For Congress Inc  Mailing Address PO Box 27750  City Macon State GA Zip Code 31221-7750  Purpose of Disbursement Committee Contribution Candidate Name James Austin Scott  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-271-214-e Date of Disbursement <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>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	9		2	0	1	0														
1000.00																							
B.	Full Name (Last, First, Middle Initial) Bass Victory Committee  Mailing Address PO Box 3451  City Concord State NH Zip Code 03302-3451  Purpose of Disbursement Committee Contribution Candidate Name Charles F. Bass  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-290-206-e Date of Disbursement <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>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	9		2	0	1	0														
1000.00																							
C.	Full Name (Last, First, Middle Initial) Benishek For Congress  Mailing Address 802 Pentoga Trail  City Crystal Falls State MI Zip Code 49920-8518  Purpose of Disbursement Committee Contribution Candidate Name Daniel J Benishek  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-239-199-e Date of Disbursement <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>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	4		2	0	1	0														
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)

<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)  
Bill Johnson For Congress Committee

Mailing Address 3755 Hunters Hill

City Poland State OH Zip Code 44514-5308

Purpose of Disbursement  
Committee Contribution

Candidate Name  
Bill Johnson

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 06

**Transaction ID:** SB23-333-244-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Bobby Schilling For Congress

Mailing Address 367 Avenue Of The Cities  
Suite D

City East Moline State IL Zip Code 61244-4053

Purpose of Disbursement  
Committee Contribution

Candidate Name  
Robert Todd Schilling

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IL District: 17

**Transaction ID:** SB23-273-241-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Bruun For Congress

Mailing Address 23069 Bland Circle

City West Linn State OR Zip Code 97068-8278

Purpose of Disbursement  
Committee Contribution

Candidate Name  
Lorentz 'Scott' Bruun

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

**Transaction ID:** SB23-296-217-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**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)

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Bucshon for Congress <hr/> Mailing Address PO Box 250 <hr/> City Newburgh State IN Zip Code 47629-0250 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Larry D Bucshon <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-94-207-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Crawford For Congress <hr/> Mailing Address PO Box 16956 <hr/> City Jonesboro State AR Zip Code 72403-6716 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Eric Alan Rick Crawford <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-166-208-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Webster For Congress <hr/> Mailing Address 3400 Old Winter Garden Road <hr/> City Orlando State FL Zip Code 32805-1134 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Daniel Webster <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-233-219-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 1900.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3900.00

**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

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NAME OF COMMITTEE (In Full)  
CMR Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David Schweikert For Congress <hr/> Mailing Address 15749 E El Lago Boulevard <hr/> City Fountain Hills State AZ Zip Code 85268-3901 <hr/> Purpose of Disbursement Committee Contribution Candidate Name David Schweikert <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District: 05	Transaction ID: SB23-259-222-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Fimian For Congress 2010 (fimian 2010) <hr/> Mailing Address PO Box 3131 <hr/> City Oakton State VA Zip Code 22124-9131 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Keith S Fimian <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 11	Transaction ID: SB23-198-209-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Fitzpatrick For Congress <hr/> Mailing Address PO Box 185 <hr/> City Langhorne State PA Zip Code 19047-0185 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Michael G Fitzpatrick <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 08	Transaction ID: SB23-186-211-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011

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

**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 16 / 23

<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 David Harmer	Transaction ID: SB23-168-220-e Date of Disbursement
	Mailing Address 9321 Silverbend Lane	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Elk Grove State CA Zip Code 95624-3985	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1900.00"/>
	Candidate Name David Jeffrey Harmer	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of Frank Guinta	Transaction ID: SB23-288-239-e Date of Disbursement
	Mailing Address PO Box 877	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Manchester State NH Zip Code 03105-0877	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name Frank Guinta	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Joe Heck	Transaction ID: SB23-180-212-e Date of Disbursement
	Mailing Address PO Box 750114	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Las Vegas State NV Zip Code 89136-0114	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name Joe Heck	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3900.00"/>
<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 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

<b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Todd Young Mailing Address PO Box 1053 City Bloomington State IN Zip Code 47402-1053 Purpose of Disbursement Committee Contribution Candidate Name Todd Christopher Young Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-176-237-e Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Gibbs For Congress Mailing Address 6992 Township Road 466 City Lakeville State OH Zip Code 44638-9794 Purpose of Disbursement Committee Contribution Candidate Name Robert Brian Gibbs Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-294-242-e Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 1900.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Jon Runyan For Congress, Inc Mailing Address PO Box 225 City Colonia State NJ Zip Code 07067-0225 Purpose of Disbursement Committee Contribution Candidate Name Jon Runyan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-243-238-e Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

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

3900.00

**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

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NAME OF COMMITTEE (In Full)  
CMR Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lou Barletta for Congress <hr/> Mailing Address PO Box 128 <hr/> City Hazleton State PA Zip Code 18201-0128 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Lou Barletta <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-100-205-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mike Keown For Congress <hr/> Mailing Address PO Box 96 <hr/> City Coolidge State GA Zip Code 31738-0096 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Michael Huel (mike) Keown <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-269-235-e Date of Disbursement 10 / 26 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Nunnelee for Congress <hr/> Mailing Address PO Box 7092 <hr/> City Tupelo State MS Zip Code 38802-7092 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Patrick Alan Nunnelee <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-95-213-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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 20 / 23

<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) Sam Caligiuri For Congress	Transaction ID: SB23-331-243-e Date of Disbursement
	Mailing Address PO Box 11252	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Waterbury State CT Zip Code 06703-0252	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name Sam Caligiuri	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Southernland For Congress	Transaction ID: SB23-231-215-e Date of Disbursement
	Mailing Address PO Box 1692	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Lynn Haven State FL Zip Code 32444-6492	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name William Steve Southernland, II	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steve Fincher For Congress	Transaction ID: SB23-194-210-e Date of Disbursement
	Mailing Address PO Box 11153	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Jackson State TN Zip Code 38308-0119	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name Steve Fincher	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<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 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) Votetipton.Com	Transaction ID: SB23-265-240-e Date of Disbursement																			
	Mailing Address PO Box 846	<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>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	7	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	7	/	2	0	1	0												
	City Cortez State CO Zip Code 81321-0846	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Committee Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Scott R Tipton	<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Walberg For Congress	Transaction ID: SB23-241-223-e Date of Disbursement																			
	Mailing Address 6769 Teachout Road	<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>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	9	/	2	0	1	0												
	City Tipton State MI Zip Code 49287-9807	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Committee Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Timothy L. Walberg	<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Yoder For Congress	Transaction ID: SB23-237-216-e Date of Disbursement																			
	Mailing Address PO Box 26742	<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>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	9	/	2	0	1	0												
	City Overland Park State KS Zip Code 66225-6742	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Committee Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Kevin W Yoder	<table border="1"><tr><td>011</td></tr></table> Category/ Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>37500.00</td></tr></table>	37500.00
37500.00		

**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 22 / 23

<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

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NAME OF COMMITTEE (In Full)  
CMR Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Citizens For Andy Hill  Mailing Address 23515 NE Novlty Hil Road Suite B221  City Redmond State WA Zip Code 98053-1996  Purpose of Disbursement Committee Contribution 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>Transaction ID:</b> SB29-324-227-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period  800.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Citizens For Steve Litzow  Mailing Address 7683 SE 27th Street # 431  City Mercer Island State WA Zip Code 98040-2804  Purpose of Disbursement Committee Contribution 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>Transaction ID:</b> SB29-211-225-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period  800.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Committee To Elect Tony Moore  Mailing Address 7683 SE 27th Street # 431  City Mercer Island State WA Zip Code 98040-2804  Purpose of Disbursement Committee Contribution 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>Transaction ID:</b> SB29-321-224-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period  800.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2400.00
<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 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

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NAME OF COMMITTEE (In Full)  
CMR Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends For Dave Schmidt <hr/> Mailing Address 11014 19th Avenue SE # 306 <hr/> City Everett State WA Zip Code 98208-5132 <hr/> Purpose of Disbursement Committee Contribution Candidate Name <hr/> 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: SB29-322-226-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 800.00
<b>B.</b> Full Name (Last, First, Middle Initial) Friends Of Joe Fain <hr/> Mailing Address PO Box 7809 <hr/> City Covington State WA Zip Code 98042-0046 <hr/> Purpose of Disbursement Committee Contribution Candidate Name <hr/> 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: SB29-214-228-e Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 800.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4000.00