

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5

National Campaign Fund

ADDRESS (number and street) 30011 Ivy Glenn Drive, Suite 223

Check if different than previously reported. (ACC) Laguna Niguel CA 92677

2. **FEC IDENTIFICATION NUMBER** ▼ C00437822 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

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 Year-End 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 (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2008 through M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James Lacy

Signature of Treasurer James Lacy *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 02 / 27 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Campaign Fund

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2008"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="91246.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="158512.63"/>	<input type="text" value="1476619.59"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="249759.09"/>	<input type="text" value="1476619.59"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="140320.62"/>	<input type="text" value="1448662.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="109438.47"/>	<input type="text" value="109438.47"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1960.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Campaign Fund

Report Covering the Period: From: / / To: / /

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).....	30353.50	568374.38
(ii) Unitemized	123159.13	903245.21
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	153512.63	1471619.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	153512.63	1471619.59
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	5000.00	5000.00
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 Transfers (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))..... ▶	158512.63	1476619.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	158512.63	1476619.59

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	38052.60	198139.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	38052.60	198139.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	98213.02	1234255.04
25. Coordinated Party Expenditures (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	5000.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	4055.00	11235.00
(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)).....	4055.00	11235.00
29. Other Disbursements	0.00	33.25
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	140320.62	1448662.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	140320.62	1448662.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	153512.63	1471619.59
34. Total Contribution Refunds (from Line 28(d))	4055.00	11235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	149457.63	1460384.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	38052.60	198139.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38052.60	198139.42

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Audit Adjustment

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
National Campaign Fund

A. MS FRANCES A BARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1130 BURNS AVE
 City CINCINNATI State OH Zip Code 45215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation TEACHER/HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2150.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2008
Transaction ID : INCA12415
 Amount of Each Receipt this Period
100.00

B. MS JANICE B RUBEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 S BAYSHORE DR APT 68
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation RETIRED SMALL BUSINESS OWNER/HOMEI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2008
Transaction ID : INCA12401
 Amount of Each Receipt this Period
350.00

C. MS MARGARET B W SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 11750 SEABECK HWY NW
 City SEABECK State WA Zip Code 98380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2008
Transaction ID : INCA12499
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	550.00
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 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. CAPT JAMES E WESTFALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1035 MAYFLOWER AVE
 City MELBOURNE State FL Zip Code 32940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.S. NAVY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2008
Transaction ID : INCA12396
 Amount of Each Receipt this Period
 100.00

B. MS CAROL BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 30573 E SUNSET DR S
 City REDLANDS State CA Zip Code 92373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12480
 Amount of Each Receipt this Period
 100.00

C. MS CAROL BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 30573 E SUNSET DR S
 City REDLANDS State CA Zip Code 92373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12479
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. MS CAROL BAKER

Mailing Address 30573 E SUNSET DR S

City State Zip Code
REDLANDS CA 92373

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12478

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. DONALD BEYER

Mailing Address R.R. 2 BOX 2417

City State Zip Code
FACTORYVILLE PA 18419

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

Name of Employer Occupation
MANUFACTURING TRAINER UNEMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12603

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Jim Bosworth

Mailing Address 7801 Nw 37th St Vip 809

City State Zip Code
Doral FL 33166

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

Name of Employer Occupation
Teacher Panamerican School

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12630

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00

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 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. William Childs

Mailing Address 3538 Eastwind St

City State Zip Code
Indianapolis IN 46227

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12685

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. MR SOLOMON COOK

Mailing Address 303 STATE ROUTE 37

City State Zip Code
HOGANSBURG NY 13655

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12387

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. COL NEAL G GRIMLAND RET

Mailing Address 642 BABCOCK RD
COTTAGE 4D

City State Zip Code
SAN ANTONIO TX 78201

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

Name of Employer Occupation
U.S. GOVERNMENT RETIRED MILITARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
803.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12460

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

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 11 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. Richard Habel

Mailing Address 538 Teton Dr.

City State Zip Code
Burley ID 83318

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12544

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Sue Hellebusch

Mailing Address 143 Country Ridge Lane

City State Zip Code
Washington MO 63090

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

Name of Employer Occupation
G. H. Tool & Mold Inc business owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12761

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Sue Hellebusch

Mailing Address 143 Country Ridge Lane

City State Zip Code
Washington MO 63090

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

Name of Employer Occupation
G. H. Tool & Mold Inc business owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12760

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 12 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MRS MELBA HELSUMS
 Full Name (Last, First, Middle Initial)
 Mailing Address HC 82 BOX 270
 City OXFORD State AR Zip Code 72565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12448
 Amount of Each Receipt this Period
 75.00

B. MR EUGENE J IDONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 HENRY ST
 City BROOKLYN State NY Zip Code 11201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12385
 Amount of Each Receipt this Period
 100.00

C. James Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 Morningside Drive
 City Not Given State No Zip Code 0
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12615
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 13 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. Fran Leifheit

Mailing Address 612 Atlantic Ave.

City Mckeesport State PA Zip Code 15132

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

Name of Employer College Professor Occupation 3 Different Colleges In PA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12567

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. MR JAMES W LIEBERT

Mailing Address 2302 E HAMPTON ST

City TUCSON State AZ Zip Code 85719

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12465

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Cecil Meadows

Mailing Address 930 Koae St

City Honolulu State HI Zip Code 96816

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

Name of Employer USN Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12581

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Al Noetzel
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 Ridge Rd
 City Middletown State CT Zip Code 6457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12527
 Amount of Each Receipt this Period
350.00

B. MISS CLARICE M PETRICK
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 710
 City CHESTER State MT Zip Code 59522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **910.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12432
 Amount of Each Receipt this Period
50.00

C. MS JANICE B RUBEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 S BAYSHORE DR APT 68
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation RETIRED SMALL BUSINESS OWNER/HOMEI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12402
 Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)..... **435.00**
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 15 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MS JANET E SCHRODER
 Full Name (Last, First, Middle Initial)
 Mailing Address 75450 ROAD 330
 City GRANT State NE Zip Code 69140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12443
 Amount of Each Receipt this Period
 100.00

B. MRS MARTHA SUMMERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3177 S GRANT ST
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 657.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12461
 Amount of Each Receipt this Period
 204.00

C. MR ROBERT SUNDERLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 953 PYRITE AVE
 City HENDERSON State NV Zip Code 89011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008
Transaction ID : INCA12469
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 354.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 72
	<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	

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR FRANK M TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1367

City LYNWOOD State WA Zip Code 98046

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2008

Transaction ID : INCA12497

Amount of Each Receipt this Period
 500.00

B. MRS JOYCE B DOHENY
Full Name (Last, First, Middle Initial)

Mailing Address 4383 ROYAL PL

City HONOLULU State HI Zip Code 96816

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

Name of Employer RETIRED Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2008

Transaction ID : INCA12492

Amount of Each Receipt this Period
 200.00

C. Velmurugan Gurusamy
Full Name (Last, First, Middle Initial)

Mailing Address 4712 Ramies Run

City Austin State TX Zip Code 78749

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

Name of Employer Computer Consultant Occupation Computing Inc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2008

Transaction ID : INCA12745

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

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 17 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. MRS KATHRYN H HEIDE

Mailing Address 5825 6TH PL

City State Zip Code
KENOSHA WI 53144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2008

Transaction ID : INCA12429

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. MRS KATHRYN H HEIDE

Mailing Address 5825 6TH PL

City State Zip Code
KENOSHA WI 53144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2008

Transaction ID : INCA12428

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. MRS KATHRYN H HEIDE

Mailing Address 5825 6TH PL

City State Zip Code
KENOSHA WI 53144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2008

Transaction ID : INCA12427

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 18 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MRS MELBA HELSUMS
 Full Name (Last, First, Middle Initial)
 Mailing Address HC 82 BOX 270
 City OXFORD State AR Zip Code 72565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2008
Transaction ID : INCA12450
 Amount of Each Receipt this Period
 75.00

B. MRS MELBA HELSUMS
 Full Name (Last, First, Middle Initial)
 Mailing Address HC 82 BOX 270
 City OXFORD State AR Zip Code 72565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2008
Transaction ID : INCA12449
 Amount of Each Receipt this Period
 75.00

C. MR GEORGE C KUNKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9552 HIGHEDGE DR
 City DALLAS State TX Zip Code 75238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HUNT PETROLEUM CORP. RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2008
Transaction ID : INCA12456
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 72
	<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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. ARMAND MORGANTE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 03 / 2008
Mailing Address 618 ORANGE AVE		Transaction ID : INCA12398
City SEBASTIAN	State FL	Zip Code 32958
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation REITRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. ARMAND MORGANTE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 03 / 2008
Mailing Address 618 ORANGE AVE		Transaction ID : INCA12399
City SEBASTIAN	State FL	Zip Code 32958
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation REITRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. MS CHRISTINE M RICHARDSON		Date of Receipt M M / D D / Y Y Y Y Y 10 / 03 / 2008
Mailing Address 950 GROSSMONT AVE		Transaction ID : INCA12474
City EL CAJON	State CA	Zip Code 92020
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MS JANICE B RUBEL		Date of Receipt
Mailing Address 2000 S BAYSHORE DR APT 68		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
City MIAMI	State FL	Zip Code 33133
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA12403
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation RETIRED SMALL BUSINESS OWNER/HOMEI		<input type="text" value="350.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1550.00"/>		

Full Name (Last, First, Middle Initial) B. MRS MARTHA SUMMERS		Date of Receipt
Mailing Address 3177 S GRANT ST		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
City ENGLEWOOD	State CO	Zip Code 80113
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA12462
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation HOMEMAKER		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="657.00"/>		

Full Name (Last, First, Middle Initial) C. MS FRANCES A BARR		Date of Receipt
Mailing Address 1130 BURNS AVE		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
City CINCINNATI	State OH	Zip Code 45215
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA12416
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation TEACHER/HOMEMAKER		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2150.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 21 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR THOMAS E BECKWITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 24055 PASEO DEL LAGO
 UNIT 1058
 City LAGUNA WOODS State CA Zip Code 92637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation VOCATIONAL COUNSELOR, PRIVATE INVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 06 / 2008
Transaction ID : INCA12483
 Amount of Each Receipt this Period 50.00

B. MR THOMAS E BECKWITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 24055 PASEO DEL LAGO
 UNIT 1058
 City LAGUNA WOODS State CA Zip Code 92637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation VOCATIONAL COUNSELOR, PRIVATE INVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 06 / 2008
Transaction ID : INCA12482
 Amount of Each Receipt this Period 50.00

C. MR THOMAS E BECKWITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 24055 PASEO DEL LAGO
 UNIT 1058
 City LAGUNA WOODS State CA Zip Code 92637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation VOCATIONAL COUNSELOR, PRIVATE INVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 06 / 2008
Transaction ID : INCA12481
 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 22 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR HAROLD E BELDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2672 LILY AVE
 City SHELTON State IA Zip Code 51201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2008
Transaction ID : INCA12421
 Amount of Each Receipt this Period
 1000.00

B. MR LOUIS J CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1202 BOLTON ST
 City BALTIMORE State MD Zip Code 21217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2008
Transaction ID : INCA12392
 Amount of Each Receipt this Period
 300.00

C. MS ANNETTE P CORREIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3507 E 27TH ST
 City TUCSON State AZ Zip Code 85713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2008
Transaction ID : INCA12464
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
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 23 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. MR D ALLAN GAVAN

Mailing Address **PO BOX 971**

City **CENTER HARBOR** State **NH** Zip Code **3226**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **803.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2008

Transaction ID : INCA12384

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)
B. MYRL GOOD

Mailing Address **2707 CORONADO DR**

City **ROSWELL** State **NM** Zip Code **88201**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2008

Transaction ID : INCA12468

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
C. MR LAWRENCE HALL

Mailing Address **PO BOX 728**

City **ELIZABETHTOWN** State **KY** Zip Code **42702**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2008

Transaction ID : INCA12413

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 72
<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)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MR ROBERT HUFF		Date of Receipt 10 / 06 / 2008 Transaction ID : INCA12442
Mailing Address 1540 N COTNER BLVD APT 109		Amount of Each Receipt this Period 102.00
City LINCOLN	State NE	Zip Code 68505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 102.00
Name of Employer US POSTAL OFFICE	Occupation RETIRED DIST CLERK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.00	

Full Name (Last, First, Middle Initial) B. MR ROBERT HUFF		Date of Receipt 10 / 06 / 2008 Transaction ID : INCA12441
Mailing Address 1540 N COTNER BLVD APT 109		Amount of Each Receipt this Period 100.00
City LINCOLN	State NE	Zip Code 68505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer US POSTAL OFFICE	Occupation RETIRED DIST CLERK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.00	

Full Name (Last, First, Middle Initial) C. MR EUGENE J IDONE		Date of Receipt 10 / 06 / 2008 Transaction ID : INCA12386
Mailing Address 75 HENRY ST		Amount of Each Receipt this Period 100.00
City BROOKLYN	State NY	Zip Code 11201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

SUBTOTAL of Receipts This Page (optional).....▶	302.00
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 25 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR HARRY H NEWTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 10960 BATON ROUGE AVE
 City NORTHRIDGE State CA Zip Code 91326
 Date of Receipt 10 / 06 / 2008
Transaction ID : INCA12473
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF-EMPLOYED PROGRAM TRAINER Occupation RETIRED BUSINESS CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1900.00

B. MRS HILDA JUNE PIANTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 OCEAN DR APT 2B
 City BATON ROUGE State LA Zip Code 70806
 Date of Receipt 10 / 06 / 2008
Transaction ID : INCA12445
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

C. MRS HILDA JUNE PIANTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 OCEAN DR APT 2B
 City BATON ROUGE State LA Zip Code 70806
 Date of Receipt 10 / 06 / 2008
Transaction ID : INCA12446
 Amount of Each Receipt this Period 200.00
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 72
	<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)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MR HENRY L WELLS		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 06 / 2008
Mailing Address 6018 MADRA AVE		Transaction ID : INCA12475
City SAN DIEGO	State CA	Zip Code 92120
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer SAN DIEGO TRUCK CENTER	Occupation RETIRED MECHANIC/HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. MS ELIZABETH WISKEMANN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 06 / 2008
Mailing Address 357 HIGHLAND AVE		Transaction ID : INCA12490
City SAN RAFAEL	State CA	Zip Code 94901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. MR JAMES M BARBER		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2008
Mailing Address 200 HUBBELL ST		Transaction ID : INCA12423
City MARTELLE	State IA	Zip Code 52305
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer US TREASURY, IRS	Occupation RETIRED COMPUTER PROGRAMMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	2300.00
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 27 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MS FRANCES A BARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1130 BURNS AVE
 City State Zip Code
 CINCINNATI OH 45215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED TEACHER/HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12417
 Amount of Each Receipt this Period
 1000.00

B. CAPT JAMES E CRINER RET
 Full Name (Last, First, Middle Initial)
 Mailing Address 2236 RACQUET CLUB DR
 City State Zip Code
 MURFREESBORO TN 37128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12411
 Amount of Each Receipt this Period
 300.00

C. MRS SYLVIA DURYEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 41ST AVE E
 City State Zip Code
 SEATTLE WA 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12498
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1800.00
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 28 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR GEORGE C KUNKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9552 HIGHEDGE DR
 City DALLAS State TX Zip Code 75238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HUNT PETROLEUM CORP. Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12457
 Amount of Each Receipt this Period
 500.00

B. MISS CLARICE M PETRICK
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 710
 City CHESTER State MT Zip Code 59522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12433
 Amount of Each Receipt this Period
 100.00

C. MR DWIGHT W PITTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 913 S COLLEEN LN
 City SIOUX FALLS State SD Zip Code 57106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12430
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 29 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MS BETTY J SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 1448 GRAND BLVD
 City HOLIDAY State FL Zip Code 34690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12409
 Amount of Each Receipt this Period
 100.00

B. MS BETTY J SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 1448 GRAND BLVD
 City HOLIDAY State FL Zip Code 34690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12408
 Amount of Each Receipt this Period
 100.00

C. MS JOY WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 2 BOX 91
 City ARNETT State OK Zip Code 73832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2008
Transaction ID : INCA12451
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 72
	<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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MS JOY WILSON		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2008
Mailing Address RR 2 BOX 91		Transaction ID : INCA12452
City ARNETT	State OK	Zip Code 73832
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name (Last, First, Middle Initial) B. MR EUGENE W BECKER		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 08 / 2008
Mailing Address 1008 S LOGAN ST APT 12		Transaction ID : INCA12436
City LENA	State IL	Zip Code 61048
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. MR WILLIAM B GANNETT		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 08 / 2008
Mailing Address 144 FREEDOM ST		Transaction ID : INCA12383
City HOPEDALE	State MA	Zip Code 1747
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. Kathie Goode

Mailing Address 9711 Vista View Drive

City State Zip Code
Austin TX 78750

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2008
Transaction ID : INCA12576

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. MR WILLIAM J MYHRE

Mailing Address 865 2ND AVE

City State Zip Code
SWEET HOME OR 97386

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

Name of Employer Occupation
RETIRED HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2008
Transaction ID : INCA12495

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City State Zip Code
MIAMI FL 33133

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

Name of Employer Occupation
SELF-EMPLOYED RETIRED SMALL BUSINESS OWNER/HOMEI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2008
Transaction ID : INCA12404

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 620.00

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

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

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FOR LINE NUMBER: PAGE 32 OF 72
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR ROBERT SUNDERLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 953 PYRITE AVE
 City HENDERSON State NV Zip Code 89011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 08 / 2008
Transaction ID : INCA12470
 Amount of Each Receipt this Period 50.00

B. Visteva
 Full Name (Last, First, Middle Initial)
 Mailing Address 12881 Knott Street, Ste 105
 City Garden Grove State CA Zip Code 92841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1214.00

Date of Receipt 10 / 08 / 2008
Transaction ID : INCA3524
 Amount of Each Receipt this Period 1027.50

C. CAPT JAMES E WESTFALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1035 MAYFLOWER AVE
 City MELBOURNE State FL Zip Code 32940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.S. NAVY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 08 / 2008
Transaction ID : INCA12397
 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1227.50
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 33 OF 72
(check only one)
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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. MR SOLOMON COOK

Mailing Address 303 STATE ROUTE 37

City State Zip Code
HOGANSBURG NY 13655

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2008

Transaction ID : INCA12388

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. MR JOSE G GONZALES

Mailing Address 1889 CALLE QUEDO # B

City State Zip Code
SANTA FE NM 87505

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

Name of Employer Occupation
SELF-EMPLOYED RETIRED CLERGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2008

Transaction ID : INCA12466

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. MS BETTY J SHAW

Mailing Address 1448 GRAND BLVD

City State Zip Code
HOLIDAY FL 34690

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2008

Transaction ID : INCA12410

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 34 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MS HELENE J WALKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 23871 WILLOWS DR APT 256
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2801.00

Date of Receipt 10 / 09 / 2008
Transaction ID : INCA12485
 Amount of Each Receipt this Period 1000.00

B. Dan Hince
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 Bald Eagle Rd
 City Hackettstown State NJ Zip Code 7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sales Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 10 / 2008
Transaction ID : INCA12613
 Amount of Each Receipt this Period 50.00

C. MR GEORGE C KUNKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9552 HIGHEDGE DR
 City DALLAS State TX Zip Code 75238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HUNT PETROLEUM CORP. Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 10 / 2008
Transaction ID : INCA12458
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional).....▶ 1150.00
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 35 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MRS TERRI S MERSEREAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 961 LITTLE BEACH DR
 PO BOX 2727
 City GEARHART State OR Zip Code 97138
 Name of Employer RETIRED Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 10 / 2008
Transaction ID : INCA12493
 Amount of Each Receipt this Period 1000.00

B. MS KAY G POITRAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 LAKE HAMILTON BEACH
 City HAINES CITY State FL Zip Code 33844
 Name of Employer RETIRED Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2008
Transaction ID : INCA12406
 Amount of Each Receipt this Period 500.00

C. MRS ALICE E SUMIDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2309 SW 1ST AVE APT 1545
 City PORTLAND State OR Zip Code 97201
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4103.00

Date of Receipt 10 / 10 / 2008
Transaction ID : INCA12494
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 2500.00
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 36 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. MR ROBERT SUNDERLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 953 PYRITE AVE
 City HENDERSON State NV Zip Code 89011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2008
Transaction ID : INCA12471
 Amount of Each Receipt this Period
 150.00

B. DONALD BEYER
 Full Name (Last, First, Middle Initial)
 Mailing Address R.R. 2 BOX 2417
 City FACTORYVILLE State PA Zip Code 18419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MANUFACTURING TRAINER Occupation UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2008
Transaction ID : INCA12604
 Amount of Each Receipt this Period
 25.00

C. Velmurugan Gurusamy
 Full Name (Last, First, Middle Initial)
 Mailing Address 4712 Ramies Run
 City Austin State TX Zip Code 78749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Computer Consultant Occupation Computing Inc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2008
Transaction ID : INCA12746
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 37 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. Richard Habel

Mailing Address 538 Teton Dr.

City Burley State ID Zip Code 83318

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2008

Transaction ID : INCA12545

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Fran Leifheit

Mailing Address 612 Atlantic Ave.

City Mckeesport State PA Zip Code 15132

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

Name of Employer College Professor Occupation 3 Different Colleges In PA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2008

Transaction ID : INCA12568

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Millie Morgan

Mailing Address 792 Sweetgum Rd.

City Du Quoin State IL Zip Code 62832

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **835.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2008

Transaction ID : INCA12621

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 72
	<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	

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Kathleen Shafer
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2042

City Sheridan State WY Zip Code 82801

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2008

Transaction ID : INCA12597

Amount of Each Receipt this Period
 250.00

B. DONALD BEYER
Full Name (Last, First, Middle Initial)

Mailing Address R.R. 2 BOX 2417

City FACTORYVILLE State PA Zip Code 18419

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

Name of Employer MANUFACTURING TRAINER Occupation UNEMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2008

Transaction ID : INCA12605

Amount of Each Receipt this Period
 25.00

C. KAY HALFMANN
Full Name (Last, First, Middle Initial)

Mailing Address BOX 227

City ROWENA State TX Zip Code 76875

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

Name of Employer INS AGENT-CSR Occupation INSURANCE AGENCY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2008

Transaction ID : INCA12578

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 39 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. Leonard Long

Mailing Address 1104longviewdr

City State Zip Code
Nb NC 28562

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

Name of Employer Occupation
Retired ret

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2008
Transaction ID : INCA12798

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. John A Murry

Mailing Address 6266 92nd Place

City State Zip Code
Pleasant Prairie WI 53158

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

Name of Employer Occupation
MFG ENGR RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2008
Transaction ID : INCA12594

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Robert Plush

Mailing Address 115 Virginia Rd.

City State Zip Code
Glenwood Springs CO 81601

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2008
Transaction ID : INCA12624

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00

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 40 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. Karen Wright

Mailing Address 1240 Gambier Road

City State Zip Code
Mount Vernon OH 43050

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

Name of Employer Occupation
Ariel Corporation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2008

Transaction ID : INCA12937

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City State Zip Code
CINCINNATI OH 45215

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

Name of Employer Occupation
RETIRED TEACHER/HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2008

Transaction ID : INCA12418

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City State Zip Code
LENA IL 61048

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2008

Transaction ID : INCA12437

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 41 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MR THOMAS E BECKWITH		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2008
Mailing Address 24055 PASEO DEL LAGO UNIT 1058		Transaction ID : INCA12484
City LAGUNA WOODS	State CA	Zip Code 92637
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation VOCATIONAL COUNSELOR, PRIVATE INVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. MS MARY JOAN BERG		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2008
Mailing Address 7663 WATSON RD APT 206		Transaction ID : INCA12438
City SAINT LOUIS	State MO	Zip Code 63119
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00
Name of Employer U.S. ARMY AVIATION SYSTEMS COMMAND	Occupation RETIRED U.S. FEDERAL GOVERNMENT EM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. MR HAROLD BERGSTROM		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2008
Mailing Address PO BOX 184		Transaction ID : INCA12431
City MOHALL	State ND	Zip Code 58761
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 72
	<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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MRS JEANEANE B DUNCAN		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2008
Mailing Address 306 SHADYWOOD RD		Transaction ID : INCA12459
City HOUSTON	State TX	Zip Code 77057
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer SELF-EMPLOYED	Occupation INVESTOR/HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) B. MS JOYCE B HEINRICH		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2008
Mailing Address 1148 BAYBERRY DR RM 109		Transaction ID : INCA12425
City WATERTOWN	State WI	Zip Code 53098
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. MRS JANE A MORGAN		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2008
Mailing Address 213 RIVER HILLS CT		Transaction ID : INCA12455
City MCKINNEY	State TX	Zip Code 75069
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 72
	<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	

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. Millie Morgan		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2008
Mailing Address 792 Sweetgum Rd.		Transaction ID : INCA12622
City Du Quoin	State IL	Zip Code 62832
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	

Full Name (Last, First, Middle Initial) B. ARMAND MORGANTE		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2008
Mailing Address 618 ORANGE AVE		Transaction ID : INCA12400
City SEBASTIAN	State FL	Zip Code 32958
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation REITRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. MRS JOYCE J RAYMOND		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2008
Mailing Address 10 SADDLEBACK RD		Transaction ID : INCA12435
City GALENA	State IL	Zip Code 61036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation ERTIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 72
	<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	

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Stephen Rutigliano
Full Name (Last, First, Middle Initial)

Mailing Address 1250 Holiday Dr

City Eustis State FL Zip Code 32726

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2008

Transaction ID : INCA12539

Amount of Each Receipt this Period
 35.00

B. William W. Squire
Full Name (Last, First, Middle Initial)

Mailing Address 39523 Via Montalvo

City Murrieta State CA Zip Code 92563

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

Name of Employer Ritired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2008

Transaction ID : INCA12889

Amount of Each Receipt this Period
 25.00

C. MR HENRY L WELLS
Full Name (Last, First, Middle Initial)

Mailing Address 6018 MADRA AVE

City SAN DIEGO State CA Zip Code 92120

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

Name of Employer SAN DIEGO TRUCK CENTER Occupation RETIRED MECHANIC/HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2008

Transaction ID : INCA12476

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 72
	<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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. LORAN F WILKENS

Mailing Address 625 S MAIN ST

City HESSTON State KS Zip Code 67062

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2008

Transaction ID : INCA12440

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Robert Brunner

Mailing Address 4001 East Washington Street

City Urbana State IL Zip Code 61802

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

Name of Employer Family doctor Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2008

Transaction ID : INCA12606

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. William Carluccio

Mailing Address 1463 Central Ave.

City Westfield State NJ Zip Code 07090

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

Name of Employer Warehouse Attendant Occupation Ford Motor Company

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2008

Transaction ID : INCA12683

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00

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 46 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MR SOLOMON COOK		Date of Receipt
Mailing Address 303 STATE ROUTE 37		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
City	State	Zip Code
HOGANSBURG	NY	13655
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA12389
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. MR FRANK CUSUMANO		Date of Receipt
Mailing Address 2009 N COMMERCE ST		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
City	State	Zip Code
STOCKTON	CA	95204
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA12491
Name of Employer	Occupation	Amount of Each Receipt this Period
HOMEMAKER	HOMEMAKER	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) C. MR DONALD E KELLEY		Date of Receipt
Mailing Address 221 E ROCKWOOD BLVD APT 320		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
City	State	Zip Code
SPOKANE	WA	99202
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA12501
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2100.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1800.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MRS GLORIA V KELLEY		Date of Receipt M M / D D / Y Y Y Y Y 10 / 14 / 2008
Mailing Address 221 E ROCKWOOD BLVD APT 320		Transaction ID : INCA12502
City SPOKANE	State WA	Zip Code 99202
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. MR WILLIAM J MYHRE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 14 / 2008
Mailing Address 865 2ND AVE		Transaction ID : INCA12496
City SWEET HOME	State OR	Zip Code 97386
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MISS CLARICE M PETRICK		Date of Receipt M M / D D / Y Y Y Y Y 10 / 14 / 2008
Mailing Address PO BOX 710		Transaction ID : INCA12434
City CHESTER	State MT	Zip Code 59522
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00	

SUBTOTAL of Receipts This Page (optional).....▶	700.00
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 48 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MS JANET E SCHRODER			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 14 / 2008		
Mailing Address 75450 ROAD 330			Transaction ID : INCA12444		
City GRANT	State NE	Zip Code 69140	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00			

Full Name (Last, First, Middle Initial) B. MS MARGARET B W SMITH			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 14 / 2008		
Mailing Address 11750 SEABECK HWY NW			Transaction ID : INCA12500		
City SEABECK	State WA	Zip Code 98380	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

Full Name (Last, First, Middle Initial) C. MS YOLANDE H STRAWINSKI			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 14 / 2008		
Mailing Address 1130 SYLVAN PL			Transaction ID : INCA12488		
City MONTEREY	State CA	Zip Code 93940	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer NEW YORK LIFE INSURANCE CO.		Occupation SELF-EMPLOYED INSURANCE AGENT/HOM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 72
	<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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial) A. MR ROBERT SUNDERLAND		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2008
Mailing Address 953 PYRITE AVE		Transaction ID : INCA12472
City HENDERSON	State NV	Zip Code 89011
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name (Last, First, Middle Initial) B. MR WALTER C EICHENHOFER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2008
Mailing Address 95 CONEJO CIR		Transaction ID : INCA12477
City PALM DESERT	State CA	Zip Code 92260
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. MS JOYCE B HEINRICH		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2008
Mailing Address 1148 BAYBERRY DR RM 109		Transaction ID : INCA12426
City WATERTOWN	State WI	Zip Code 53098
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 50 OF 72
(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)
National Campaign Fund

Full Name (Last, First, Middle Initial)
A. MRS OWEDA V JOHNSEN

Mailing Address 3403 W CANYON LAKES DR

City KENNEWICK	State WA	Zip Code 99337
-------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation HOMEMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2008

Transaction ID : INCA12503

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)
B. MS YOLANDE H STRAWINSKI

Mailing Address 1130 SYLVAN PL

City MONTEREY	State CA	Zip Code 93940
------------------	-------------	-------------------

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

Name of Employer NEW YORK LIFE INSURANCE CO.	Occupation SELF-EMPLOYED INSURANCE AGENT/HOM
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2008

Transaction ID : INCA12489

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	30353.50

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

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

FOR LINE NUMBER: PAGE 51 OF 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Legacy Committee PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 30011 Ivy Glenn Dr., Ste 223
 City Laguna Niguel State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C** C00429084
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2008
Transaction ID : RCVA3536
 Amount of Each Receipt this Period
 5000.00

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

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

**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 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)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant gees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB3540

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. James Lacy

Mailing Address 30011 Ivy Glenn Dr #223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement
Meetings and conferences

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB3512

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Visteva

Mailing Address 12881 Knott Street, Ste 105

City Garden Grove State CA Zip Code 92841

Purpose of Disbursement
General websit service

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB3510

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 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)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. Western CPAC

Mailing Address 30011 Ivy Glenn Dr. Ste 223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement
Coservative Political Conference Event

007

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2008			

Transaction ID : EXPB3511

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Admin accounting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2008			

Transaction ID : EXPB3520

Amount of Each Disbursement this Period

2826.90

Full Name (Last, First, Middle Initial)

C. Barrett Garcia

Mailing Address 32302 Camino Capistrano #214

City San Juan Capistran State CA Zip Code 92675

Purpose of Disbursement
Accounting services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2008			

Transaction ID : EXPB3519

Amount of Each Disbursement this Period

1035.00

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

4361.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. Landslide Communications

Mailing Address 30011 Ivy Glenn Dr., Ste 223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement
General committee management fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2008

Transaction ID : EXPB3518

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Landslide Communications

Mailing Address 30011 Ivy Glenn Dr., Ste 223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement
General committee management fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2008

Transaction ID : EXPB3547

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. AMEX Fees

Mailing Address 1101 Frederick Street

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2008

Transaction ID : EXPB12363

Amount of Each Disbursement this Period

25.00

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

20025.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2008

Transaction ID : EXPB12360

Amount of Each Disbursement this Period

217.99

Full Name (Last, First, Middle Initial)

B. SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2008

Transaction ID : EXPB12361

Amount of Each Disbursement this Period

182.65

Full Name (Last, First, Middle Initial)

C. SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2008

Transaction ID : EXPB12359

Amount of Each Disbursement this Period

1379.53

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

1780.17

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 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)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. Advanced Mailing Services, LLC

Mailing Address 14970Farm Creek Drive

City Woodbridge State VA Zip Code 22191

Purpose of Disbursement
Postage

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2008

Transaction ID : EXPB29726

Amount of Each Disbursement this Period

2328.90

Full Name (Last, First, Middle Initial)

B. AMEX Fees

Mailing Address 1101 Frederick Street

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2008

Transaction ID : EXPB29734

Amount of Each Disbursement this Period

71.84

Full Name (Last, First, Middle Initial)

C. BB&T Merchant Services

Mailing Address 7200 Bank Court

City Frederick State MD Zip Code 21703

Purpose of Disbursement
Merchant Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2008

Transaction ID : EXPB29785

Amount of Each Disbursement this Period

521.30

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

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

2922.04

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : EXPB29785

Nova

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. Barrett Garcia

Mailing Address 32302 Camino Capistrano #214

City San Juan Capistran State CA Zip Code 92675

Purpose of Disbursement
Accounting services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2008

Transaction ID : EXPB12366

Amount of Each Disbursement this Period

1457.50

Full Name (Last, First, Middle Initial)

B. Global Service Fee

Mailing Address

City State Zip Code

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2008

Transaction ID : EXPB29729

Amount of Each Disbursement this Period

592.40

Full Name (Last, First, Middle Initial)

C. SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2008

Transaction ID : EXPB29795

Amount of Each Disbursement this Period

-25.00

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

2024.90

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 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)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2008

Transaction ID : EXPB12364

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. The Richard Norman Company

Mailing Address 44084 Riverside Parkway, #350

City Lansdowne State VA Zip Code 20176

Purpose of Disbursement
Addition Error

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For:
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2008

Transaction ID : EXPB29733

Amount of Each Disbursement this Period

12.61

Full Name (Last, First, Middle Initial)

C. United Bank

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For:
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2008

Transaction ID : EXPB29728

Amount of Each Disbursement this Period

375.53

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

438.14

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 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)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. WJG Marketing Services

Mailing Address 5712-H Industry Lane

City Frederick State MD Zip Code 21074

Purpose of Disbursement
Escrow/Caging

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	0	8		

Transaction ID : EXPB29727

Amount of Each Disbursement this Period

1	3	4	.	0	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

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

1	3	4	.	0	2
---	---	---	---	---	---

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

3	8	0	5	2	.	6	0
---	---	---	---	---	---	---	---

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

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

NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)

A. MR DONALD E AUSTIN

Mailing Address 819 COUNTY ROAD 28

City SOUTH NEW BERLIN State NY Zip Code 13843

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2008

Transaction ID : EXPB29731

Amount of Each Disbursement this Period

1655.00

Full Name (Last, First, Middle Initial)

B. COL EDWIN S SCHICK JR

Mailing Address 55056 COUNTRY CLUB DR
PO BOX 997

City YUCCA VALLEY State CA Zip Code 92284

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2008

Transaction ID : EXPB29730

Amount of Each Disbursement this Period

2400.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

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

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

4055.00

4055.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) National Campaign Fund	Transaction ID : RCVC84
--	--------------------------------

LOAN SOURCE Full Name (Last, First, Middle Initial) Legacy Committee PAC	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 30011 Ivy Glenn Dr., Ste 223	
City Laguna Niguel State CA ZIP Code 92677	

Original Amount of Loan 5000.00	Cumulative Payment To Date 5000.00	Balance Outstanding at Close of This Period 0.00
------------------------------------	---------------------------------------	---

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M M / D D / Y Y Y Y Y Y	M M / D D / Y Y Y Y Y Y	06 / 06 / 2008	None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing 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 Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 0.00
TOTALS This Period (last page in this line only).....▶	[] 0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/9

Transaction ID : RVCV84

Temporary loan

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 64 OF 72
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Response Dynamics, Inc.	Nature of Debt (Purpose): P.O.Box and bulk rate mailing account deposit
Mailing Address 2070 Chain Bridge Rd # 520	
City State Zip Code Vienna VA 22182	

Outstanding Balance Beginning This Period <input type="text" value="1960.00"/>	Transaction ID : PAYD107	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1960.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1960.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="1960.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1960.00"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Excellentia Inc.		Date M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2008	
Mailing Address 4224 67th Ave CT W		Amount 5497.50	
City University Place	State WA	Zip Code 98466	Transaction ID : EDTEALC195
Purpose of Expenditure Book publishing	Category/Type 003	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 312220.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee The Richard Norman Company		Date M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2008	
Mailing Address 44084 Riverside Parkway, #350		Amount 2083.64	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : EDTEALC196
Purpose of Expenditure Postage	Category/Type 003	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 312220.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7581.14
(b) SUBTOTAL of Unitemized 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 party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund
FEC IDENTIFICATION NUMBER C C00437822
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name (Last, First, Middle Initial) of Payee The Richard Norman Company
Mailing Address 44084 Riverside Parkway, #350
City Lansdowne State VA Zip Code 20176
Purpose of Expenditure Postage Category/Type 003
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama
Calendar Year-To-Date Per Election for Office Sought 312220.01
Disbursement For: 2008 Primary General Other (specify)

Full Name (Last, First, Middle Initial) of Payee Mid America Printing
Mailing Address 2070 Chain Bridge Rd # 520
City Vienna State VA Zip Code 22182
Purpose of Expenditure Printing Category/Type 003
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain
Calendar Year-To-Date Per Election for Office Sought 906374.81
Disbursement For: 2008 Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 12171.49
(b) SUBTOTAL of Unitemized 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 party committee) any political party committee or its agent.
James Lacy [Electronically Filed] Date 02 / 27 / 2012
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER ▼ C C00437822
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 06 / 2008
Mailing Address 2070 Chain Bridge Rd # 520		Amount 13225.06
City Vienna	State VA	
Zip Code 22182	Transaction ID : EDTEALC199	
Purpose of Expenditure Printing	Category/ Type 003	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 906374.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 07 / 2008
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5652.33
City Vienna	State VA	
Zip Code 22182	Transaction ID : EDTEALC200	
Purpose of Expenditure Printing	Category/ Type 003	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 906374.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	18877.39
(b) SUBTOTAL of Unitemized 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 party committee) any political party committee or its agent.

James Lacy
Signature _____ [Electronically Filed] Date MM / DD / YYYY **02 / 27 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00437822 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mid America Printing		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 08 / 2008 </div>
Mailing Address 2070 Chain Bridge Rd # 520		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 4660.13 </div>
City State Zip Code Vienna VA 22182	Transaction ID : EDTEALC210	
Purpose of Expenditure Printing	Category/Type 003	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 906374.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 10 / 2008 </div>	
Mailing Address 8 Herbert Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1000.00 </div>	
City State Zip Code Alexandria VA 22305		Transaction ID : EDTEALC212	
Purpose of Expenditure Postage	Category/Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 906374.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 5660.13 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 5660.13 </div>

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 party committee) any political party committee or its agent.

James Lacy
 Signature

[Electronically Filed] Date 02 / 27 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund
FEC IDENTIFICATION NUMBER C00437822
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name (Last, First, Middle Initial) of Payee C4Strategies
Mailing Address 8230 Catbird Circle #302
City Lorton State VA Zip Code 22079
Amount 20395.17
Transaction ID: EDTEALC201
Purpose of Expenditure Website services Category/Type 003
Office Sought: [X] President
Check One: [] Support [X] Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama
Disbursement For: [] Primary [X] General
Calendar Year-To-Date Per Election for Office Sought 312220.01

Full Name (Last, First, Middle Initial) of Payee Eagle Publishing
Mailing Address One Massachusetts Ave., 6th Floor
City Washington State DC Zip Code 20001
Amount 970.00
Transaction ID: EDTEALC203
Purpose of Expenditure E-mail broadcasts Category/Type 003
Office Sought: [X] President
Check One: [] Support [X] Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama
Disbursement For: [] Primary [X] General
Calendar Year-To-Date Per Election for Office Sought 312220.01

(a) SUBTOTAL of Itemized Independent Expenditures 21365.17
(b) SUBTOTAL of Unitemized 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 party committee) any political party committee or its agent.

James Lacy

[Electronically Filed]

Date

02 / 27 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER ▼ C C00437822
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Strategic Services Advisors		Date M M / D D / Y Y Y Y 10 / 13 / 2008
Mailing Address 3110 Judson St. PMB #221		Amount 2000.00
City Gig Harbor	State Zip Code WA 98335	
Purpose of Expenditure Website services	Category/Type 003	Transaction ID : EDTEALC204
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 312220.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee C4Strategies		Date M M / D D / Y Y Y Y 10 / 14 / 2008
Mailing Address 8230 Catbird Circle #302		Amount 3608.99
City Lorton	State Zip Code VA 22079	
Purpose of Expenditure List rentals	Category/Type 003	Transaction ID : EDTEALC205
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 312220.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5608.99
(b) SUBTOTAL of Unitemized 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 party committee) any political party committee or its agent.

James Lacy
Signature [Electronically Filed] Date M M / D D / Y Y Y Y
02 / 27 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER ▼ C C00437822
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Eagle Publishing		Date MM / DD / YYYY 10 / 14 / 2008
Mailing Address One Massachusetts Ave., 6th Floor		Amount 8608.00
City Washington	State DC	Zip Code 20001
Purpose of Expenditure E-mail broadcasts	Category/Type 003	Transaction ID : EDTEALC206
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 312220.01		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 14 / 2008
Mailing Address 2070 Chain Bridge Rd # 520		Amount 3323.08
City Vienna	State VA	Zip Code 22182
Purpose of Expenditure Printing	Category/Type 003	Transaction ID : EDTEALC211
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 906374.81		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11931.08
(b) SUBTOTAL of Unitemized 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 party committee) any political party committee or its agent.

James Lacy
Signature

[Electronically Filed] Date **02 / 27 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Campaign Fund	FEC IDENTIFICATION NUMBER ▼ C C00437822
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 14 / 2008
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5907.84
City Vienna	State VA	
Zip Code 22182	Transaction ID : EDTEALC213	
Purpose of Expenditure Printing	Category/Type 003	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 906374.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 14 / 2008
Mailing Address 2070 Chain Bridge Rd # 520		Amount 9109.79
City Vienna	State VA	
Zip Code 22182	Transaction ID : EDTEALC214	
Purpose of Expenditure Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 906374.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	15017.63
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	98213.02

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 party committee) any political party committee or its agent.

James Lacy
Signature

[Electronically Filed] Date **02 / 27 / 2012**