

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

ADDRESS (number and street) 1615 L STREET, NW SUITE 1100 WASHINGTON DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00235309 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 01 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Linda Woolley Signature of Treasurer Electronically Filed by Linda Woolley Date 07 30 2009

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

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		17431.21
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	17431.21									
(c) Total Receipts (from Line 19)	22080.00	22080.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	39511.21	39511.21								
7. Total Disbursements (from Line 31)	34059.96	34059.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5451.25	5451.25								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

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)	14600.00	14600.00
(ii) Unitemized	480.00	480.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15080.00	15080.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	20080.00	20080.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	2000.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	22080.00	22080.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	22080.00	22080.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	59.96	59.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	59.96	59.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34000.00	34000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	34059.96	34059.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34059.96	34059.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	20080.00	20080.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20080.00	20080.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	59.96	59.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	59.96	59.96

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) Bob Ball		Date of Receipt
	Mailing Address 7001 Columbia Gateway Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2009
	City	State	Zip Code
	Columbia	MD	21046
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8525
Name of Employer Merkle Inc.		Occupation VP, Senior Creative Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ -250.00	<input type="text"/> -250.00
Void of Credit Card Contribution Dated 12/18/08			

B.	Full Name (Last, First, Middle Initial) Glenn Eisen		Date of Receipt
	Mailing Address 3340 Ocean Park Blvd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 07 / 2009
	City	State	Zip Code
	Santa Monica	CA	90405
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8474
Name of Employer Guthy-Renker		Occupation EVP, Direct Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	<input type="text"/> 5000.00
Contribution			

C.	Full Name (Last, First, Middle Initial) Nancy G. Evensen		Date of Receipt
	Mailing Address 17683 Ballantrae Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 28 / 2009
	City	State	Zip Code
	Eden Prairie	MN	55347
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8481
Name of Employer Net Now Video		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	<input type="text"/> 1000.00
Contribution			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<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)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) Steve Fuller		Date of Receipt MM / DD / YYYY 04 / 08 / 2009		
	Mailing Address 15 Casco Street		Transaction ID: SA11AI.8476		
	City Freeport	State ME	Zip Code 04033	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer L.L. Bean	Occupation Chief Marketing Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Kenneth Geis		Date of Receipt MM / DD / YYYY 06 / 30 / 2009		
	Mailing Address 7100 Columbia Gateway Drive		Transaction ID: SA11AI.8526		
	City Columbia	State MD	Zip Code 21046	Amount of Each Receipt this Period -250.00	
	FEC ID number of contributing federal political committee. C		Void of Credit Card Contribution Dated 12/18/09		
	Name of Employer Merkle Inc.	Occupation VP, Engagement & Innovation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ -250.00			

C.	Full Name (Last, First, Middle Initial) Lara Gold		Date of Receipt MM / DD / YYYY 06 / 30 / 2009		
	Mailing Address 1465 Braman Avenue		Transaction ID: SA11AI.8524		
	City Fort Myers	State FL	Zip Code 33901	Amount of Each Receipt this Period -100.00	
	FEC ID number of contributing federal political committee. C		Void of Credit Card Contribution Dated 10/13/08		
	Name of Employer Fushia Company	Occupation Business Development & Acquisition			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ -100.00			

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 8 / 19
(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)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

<p>A. Full Name (Last, First, Middle Initial) John V. Healy</p> <p>Mailing Address 125 Hopkins Lane</p> <p>City State Zip Code East Orleans MA 02643</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Dydacomp Development Corp. Occupation: Chief Executive Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1200.00</p>	<p>Date of Receipt 05 / 12 / 2009</p> <p>Transaction ID: SA11AI.8491</p> <p>Amount of Each Receipt this Period 1200.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Gary Laben</p> <p>Mailing Address 6310 Turner Way</p> <p>City State Zip Code Dallas TX 75230</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Knowledge Base Marketing Occupation: CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 05 / 01 / 2009</p> <p>Transaction ID: SA11AI.8490</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Stephen M. Lacy</p> <p>Mailing Address 1716 Locust Street</p> <p>City State Zip Code Des Moines IA 50309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Meredith Corporation Occupation: President & CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt 04 / 09 / 2009</p> <p>Transaction ID: SA11AI.8473</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	2700.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 19
	<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)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) Ramnath A. Lakshmi-Ratan		Date of Receipt
	Mailing Address 1120 Avenue of the Americas		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8478
Name of Employer Direct Marketing Association		Occupation EVP & COO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Susan Kerrigan Meany		Date of Receipt
	Mailing Address 6350 Transit Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Depew	NY	14043
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8494
Name of Employer SKM Group		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Godfred P. Otuteye		Date of Receipt
	Mailing Address 12131 Western Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Garden Grove	CA	92841
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8471
Name of Employer Money Mailer Direct Marketing		Occupation Chief Executive Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 750.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1500.00
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 10 / 19
	<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)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) Christopher Quinn	Date of Receipt MM / DD / YYYY 05 / 07 / 2009
	Mailing Address 4727 Commons Drive Apt. 304	Transaction ID: SA11AI.8495
	City Annandale State VA Zip Code 22003	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Direct Marketing Association Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

B.	Full Name (Last, First, Middle Initial) Frederick J. Simon	Date of Receipt MM / DD / YYYY 04 / 20 / 2009
	Mailing Address 442 S. 82nd Street	Transaction ID: SA11AI.8479
	City Omaha State NE Zip Code 68114	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Omaha Steaks International Occupation Exec. Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 3000.00	

C.	Full Name (Last, First, Middle Initial) Pat Snyder	Date of Receipt MM / DD / YYYY 04 / 23 / 2009
	Mailing Address One Cabela Drive	Transaction ID: SA11AI.8521
	City Sidney State NE Zip Code 69160	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Cabela's Occupation SR VP, Merchandising, Marketing, RTL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional)	4250.00
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 / 19	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) Dawn M. Zier		Date of Receipt	
	Mailing Address One Reader's Digest Road		M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.8486
	Pleasantville	NY	10570	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	500.00
	Name of Employer Reader's Digest		Occupation Marketing	Contribution
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)	500.00
TOTAL This Period (last page this line number only)	14600.00

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

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

FOR LINE NUMBER: PAGE 12 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.

Full Name (Last, First, Middle Initial)
ACXIOM CORPORATION ASSOCIATES PAC

Mailing Address #1 INFORMATION WAY

City State Zip Code
LITTLE ROCK AR 72202

FEC ID number of contributing federal political committee. **C** C00350835

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 9

Transaction ID: SA11C.8467

Amount of Each Receipt this Period
5000.00

Contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 19	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) SALAZAR FOR SENATE		Date of Receipt																					
	Mailing Address PO BOX 600		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		1	8		2	0	0	9														
	City State Zip Code DENVER CO 80201		Transaction ID: SA16.8510																					
	FEC ID number of contributing federal political committee. C C00397679		Amount of Each Receipt this Period 2000.00																					
Name of Employer Occupation		Refund of 3 Contributions Made on 3/15/07 and 3/27/-07																						
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00																						

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	2000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) BOB GOODLATTE FOR CONGRESS COMMITTEE	Transaction ID: SB23.8489
	Mailing Address P O BOX 292	Date of Disbursement 04 / 30 / 2009
	City ROANOKE State VA Zip Code 24011	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name ROBERT W GOODLATTE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOUCHER FOR CONGRESS COMMITTEE	Transaction ID: SB23.8497
	Mailing Address PO Box 2000	Date of Disbursement 05 / 19 / 2009
	City Abingdon State VA Zip Code 24212	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name FREDRICK C BOUCHER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MCHUGH	Transaction ID: SB23.8485
	Mailing Address 228 S. Washington St. Ste. 115 PO Box 70052	Date of Disbursement 04 / 24 / 2009
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JOHN M MCHUGH	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT ED TOWNS	Transaction ID: SB23.8522 Date of Disbursement
	Mailing Address 438 Lewis Avenue	<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City Brooklyn State NY Zip Code 11233	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name EDOLPHUS TOWNS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEMINT FOR SENATE COMMITTEE INC	Transaction ID: SB23.8505 Date of Disbursement
	Mailing Address PO BOX 10407	<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City GREENVILLE State SC Zip Code 29603	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name JAMES W DEMINT	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DEMINT FOR SENATE COMMITTEE INC	Transaction ID: SB23.8527 Date of Disbursement
	Mailing Address PO BOX 10407	<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City GREENVILLE State SC Zip Code 29603	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name JAMES W DEMINT	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN	Transaction ID: SB23.8492 Date of Disbursement
	Mailing Address PO BOX 3197	<input type="text" value="05"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City LITTLE ROCK State AR Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2800.00"/>
	Candidate Name BLANCHE LAMBERT LINCOLN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN	Transaction ID: SB23.8493 Date of Disbursement
	Mailing Address PO BOX 3197	<input type="text" value="05"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City LITTLE ROCK State AR Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Earmarked Contribution: Edward Gleiman	<input type="text" value="100.00"/>
	Candidate Name BLANCHE LAMBERT LINCOLN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN	Transaction ID: SB23.8528 Date of Disbursement
	Mailing Address PO BOX 3197	<input type="text" value="05"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City LITTLE ROCK State AR Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2100.00"/>
	Candidate Name BLANCHE LAMBERT LINCOLN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JAY ROCKEFELLER	Transaction ID: SB23.8506 Date of Disbursement
	Mailing Address PO BOX 1909	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City CHARLESTON State WV Zip Code 25327	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name JOHN DAVISON IV ROCKEFELLER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FUND FOR THE MAJORITY	Transaction ID: SB23.8498 Date of Disbursement
	Mailing Address 1212 S VICTORY BLVD	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City BURBANK State CA Zip Code 91502	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GRASSLEY COMMITTEE	Transaction ID: SB23.8468 Date of Disbursement
	Mailing Address PO BOX 1000	<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City DES MOINES State IA Zip Code 50304	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name CHARLES E GRASSLEY	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.

Full Name (Last, First, Middle Initial)
ISSA FOR CONGRESS

Mailing Address P O BOX 760

City VISTA State CA Zip Code 92085

Purpose of Disbursement
Contribution

Candidate Name
DARRELL ISSA

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 49

Transaction ID: SB23.8461

Date of Disbursement

01 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
MIKE CRAPO FOR US SENATE

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL D CRAPO

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: ID District: 00

Transaction ID: SB23.8503

Date of Disbursement

06 / 11 / 2009

Amount of Each Disbursement this Period

4000.00

C.

Full Name (Last, First, Middle Initial)
MIKE CRAPO FOR US SENATE

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL D CRAPO

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: ID District: 00

Transaction ID: SB23.8529

Date of Disbursement

06 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 19

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

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NAME OF COMMITTEE (In Full)
DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

A.	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	Transaction ID: SB23.8469 Date of Disbursement
	Mailing Address 320 FIRST STREET	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB23.8480 Date of Disbursement
	Mailing Address 123 NE 3RD SUITE 321	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City PORTLAND State OR Zip Code 97232	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name RONALD LEE WYDEN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	State: OR District: 00	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)