

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

NAMIC PAC

ADDRESS (number and street) 3601 Vincennes Road
PO Box 68700
 Check if different than previously reported. (ACC)
Indianapolis IN 46268

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00170258

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on 11 07 2006 in the State of DC

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Gregg A. Dykstra

Signature of Treasurer Electronically Filed by Gregg A. Dykstra Date 10 25 2006

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							
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NAMIC PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		90708.23
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	103959.60									
(c) Total Receipts (from Line 19)	14929.50	106247.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	118889.10	196955.23								
7. Total Disbursements (from Line 31)	59500.00	137566.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59389.10	59389.10								
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
NAMIC PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	11617.50	68577.00
(i) Itemized (use Schedule A)	812.00	25170.00
(ii) Unitemized	12429.50	93747.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	2500.00	12500.00
(c) Other Political Committees (such as PACs)	14929.50	106247.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	14929.50	106247.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14929.50	106247.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. 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.....	0.00	766.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	766.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59500.00	136800.00
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))..	59500.00	137566.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	59500.00	137566.13

DETAILED SUMMARY PAGE
of Disbursements

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)	14929.50	106247.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14929.50	106247.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	766.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	766.13

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 1493 Hunters Glen		Transaction ID: R7216
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 210.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer NAMIC	Occupation State Relations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

Full Name (Last, First, Middle Initial) B. Mr. Neil Alldredge		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1493 Hunters Glen		Transaction ID: R7250
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation State Relations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

Full Name (Last, First, Middle Initial) C. Mr. Bart Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 3601 Vincennes Road PO Box 68700		Transaction ID: R7251
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior VP - Member Svcs/Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

SUBTOTAL of Receipts This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 31
	<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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. John B. Arbuckle, Jr., CIC, AAI,P Mailing Address HC 37, Box 144 City Lewisburg State WV Zip Code 24901-9532 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6 Transaction ID: R7217 Amount of Each Receipt this Period 2800.00 Credit Card
Name of Employer: Farmers Home Fire Insurance Co. of Wes Occupation: Treasurer/Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2800.00		

B. Full Name (Last, First, Middle Initial) Mr. Leonard Blick Mailing Address 303 6th Street PO Box 462 City Sherrard State IL Zip Code 61281-0462 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6 Transaction ID: R7218 Amount of Each Receipt this Period 210.00 Credit Card
Name of Employer: Svea Mutual Insurance Company Occupation: Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		

C. Full Name (Last, First, Middle Initial) Mr. Larry A. Bray Mailing Address PO Box 863 City Elkhorn State WI Zip Code 53121-0863 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6 Transaction ID: R7236 Amount of Each Receipt this Period 100.00 Credit Card
Name of Employer: Sugar Creek Mutual Insurance Company Occupation: Manager 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)	3110.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 31
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 5290 Duke Street		Transaction ID: R7248
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer NAMIC Occupation NAMIC Federal Affairs Representative	Aggregate Year-to-Date ▼ 570.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marliss Browder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 5290 Duke Street		Transaction ID: R7254
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation NAMIC Federal Affairs Representative	Aggregate Year-to-Date ▼ 570.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 527 W 46th Street		Transaction ID: R7219
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 850.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer NAMIC Occupation NAMIC President	Aggregate Year-to-Date ▼ 2381.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1020.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 31
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles M. Chamness		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 527 W 46th Street		Transaction ID: R7255
City State Zip Code Indianapolis IN 46208-3605	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2381.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Detlefsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 3601 Vincennes Road		Transaction ID: R7257
City State Zip Code Indianapolis IN 46268	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Public Policy Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Mr. Gregg A. Dykstra		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1838 Arrowwood Drive		Transaction ID: R7258
City State Zip Code Carmel IN 46033-9020	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Internal Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	115.00
TOTAL This Period (last page this line number only)	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 31
	<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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Mark H. Ewert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 3240 Nassau Drive		Transaction ID: R7249
City State Zip Code Brookfield WI 53045	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Partners Mutual Occupation Executive Vice President	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mr. Henry H. Gibbel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 20 E. 4th Street		Transaction ID: R7220
City State Zip Code Lititz PA 17543-7007	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Lititz Mutual Insurance Company Occupation President & CEO	Aggregate Year-to-Date ▼ 320.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ms. Marsha Harrison		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 620 Ashford Drive		Transaction ID: R7259
City State Zip Code Indianapolis IN 46214	Amount of Each Receipt this Period 12.50	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC Occupation State Affairs Representative	Aggregate Year-to-Date ▼ 262.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	382.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 31
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Georgiann M. Howell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 12511 Thunder Chase Drive		Transaction ID: R7260	
City State Zip Code Reston VA 20191-1613	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer Occupation NAMIC Public Affairs Representative	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. H. Gregg Huey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 10 W 106th Street		Transaction ID: R7222	
City State Zip Code Indianapolis IN 46290	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Credit Card		
Name of Employer Occupation Indiana Farmers Mutual Insurance Compa Senior V.P., COO	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Steve Jackson, IV		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 1810 E. Palm Avenue #6104		Transaction ID: R7223	
City State Zip Code Tampa FL 33605	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. C	Credit Card		
Name of Employer Occupation Reliable Reports Employee	Aggregate Year-to-Date ▼ 375.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 31
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Lee A. Janis, III		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address PO Box 30660		Transaction ID: R7240	
City State Zip Code Lansing MI 48909-8160		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Auto-Owners Insurance Company		Occupation Vice President - Regional Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Jeckel		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 1536 Pulaski St.		Transaction ID: R7224	
City State Zip Code Lincoln IL 62656-3241		Amount of Each Receipt this Period 410.00	
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Frontier Mutual Insurance Company		Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 910.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert Jeckel		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 1536 Pulaski St.		Transaction ID: R7242	
City State Zip Code Lincoln IL 62656-3241		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Credit Card	
Name of Employer Frontier Mutual Insurance Company		Occupation Vice President	
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) ▶	1160.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Kevin Meskell Mailing Address 71 Inman Road City Weymouth State MA Zip Code 02188-1825 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6 Transaction ID: R7226 Amount of Each Receipt this Period 220.00 Credit Card
Name of Employer Quincy Mutual Fire Insurance Company Occupation Executive Vice President/Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1220.00		

B. Full Name (Last, First, Middle Initial) Mr. David Middleton Mailing Address 16533 Wanatah Trail City Westfield State IN Zip Code 46074 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 Transaction ID: R7262 Amount of Each Receipt this Period 15.00 Manual Deduction
Name of Employer NAMIC Occupation Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 427.50		

C. Full Name (Last, First, Middle Initial) Mr. Jim Miller Mailing Address 11600 Millstone Drive City Grand Ledger State MI Zip Code 48837-2270 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6 Transaction ID: R7238 Amount of Each Receipt this Period 250.00 Credit Card
Name of Employer Michigan Insurance Coalition Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	485.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 31
	<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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Richard M. Raun		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address PO Box 240		Transaction ID: R7227
City State Zip Code Carlton MN 55718-0240	Amount of Each Receipt this Period 210.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Woodland Mutual Insurance Company	Occupation Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) Mr. David Reddick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 13400 North White Cloud Court		Transaction ID: R7264
City State Zip Code Camby IN 46113-8708	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Market Regulation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

C. Full Name (Last, First, Middle Initial) Mr. Justin Roth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 727 3rd Street NE		Transaction ID: R7265
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Senior Federal Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 31
	<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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Randy A. Sabers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 216 North Main, PO Box 610		Transaction ID: R7228
City State Zip Code Salem SD 57058-0610	Amount of Each Receipt this Period 280.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer McCook Farm Mutual Insurance Company o	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

B. Full Name (Last, First, Middle Initial) Mr. Randy A. Sabers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 216 North Main, PO Box 610		Transaction ID: R7243
City State Zip Code Salem SD 57058-0610	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer McCook Farm Mutual Insurance Company o	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

C. Full Name (Last, First, Middle Initial) Ms. Pamela Schmidt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 1460 Wells Street		Transaction ID: R7229
City State Zip Code Enumclaw WA 98022-3003	Amount of Each Receipt this Period 435.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Mutual of Enumclaw Insurance	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00	

SUBTOTAL of Receipts This Page (optional) ▶	815.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 31
	(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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Ms. Kristen Sizelove		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 1420 Bayswater Lane		Transaction ID: R7268	
City State Zip Code Cicero IN 46034	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation Director of Membership Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00		

Full Name (Last, First, Middle Initial) B. Mr. Duane D. Smith, PFMM		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address PO Box 452		Transaction ID: R7230	
City State Zip Code Franklin IN 46131-0452	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Credit Card		
Name of Employer Farmers Mutual Insurance Company of Jo	Occupation Secretary/Manager		
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) C. Mr. Tim Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 3601 Vincennes Road		Transaction ID: R7269	
City State Zip Code Indianapolis IN 46268-0700	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Manual Deduction		
Name of Employer NAMIC	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00		

SUBTOTAL of Receipts This Page (optional) ▶	1030.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 31
	<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)
NAMIC PAC

A. Full Name (Last, First, Middle Initial) Mr. Bruce D. Thomas, PFMM		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 1615 E. Elm		Transaction ID: R7239
City State Zip Code Alogona IA 50511-2022	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Heartland Mutual Insurance Association	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Mr. Michael Ulmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 9404 Gladstone Drive		Transaction ID: R7273
City State Zip Code Pittsboro IN 46167	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	Manual Deduction	
Name of Employer NAMIC	Occupation Vice President - Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C. Full Name (Last, First, Middle Initial) Mr. Dominick Vicari		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 3907 William Street		Transaction ID: R7231
City State Zip Code Seaford NY 11783-2135	Amount of Each Receipt this Period 160.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Greater New York Insurance Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

SUBTOTAL of Receipts This Page (optional) ▶	670.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 31
	<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Mr. Thomas A. White		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 19 Park Avenue		Transaction ID: R7233
City State Zip Code East Greenbush NY 12061-2118	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Occupation Community Mutual President	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Janet Wright		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 429 Conduitt Drive		Transaction ID: R7234
City State Zip Code Mooresville IN 46158-1356	Amount of Each Receipt this Period 480.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Occupation NAMIC Publications Manager	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 480.00	

Full Name (Last, First, Middle Initial) C. Mr. Michael A. Yeager		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 1690 Scherersville Road		Transaction ID: R7235
City State Zip Code Allentown PA 18104-9779	Amount of Each Receipt this Period 860.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Occupation Lehigh Mutual Insurance Company President & CEO	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2110.00	

SUBTOTAL of Receipts This Page (optional) ▶	1690.00
TOTAL This Period (last page this line number only) ▶	11617.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 31
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NAMIC PAC

A. Full Name (Last, First, Middle Initial)
Secura PAC

Mailing Address 2401 S. Memorial Drive
PO Box 819

City State Zip Code
Appleton WI 54912

FEC ID number of contributing federal political committee. **C** C00343384

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	6

Transaction ID: R7244

Amount of Each Receipt this Period
2500.00

Check

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	2500.00

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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Bachmann for Congress		Transaction ID: D773 Date of Disbursement 10 / 03 / 2006
Mailing Address PO Box 49756		Amount of Each Disbursement this Period 1000.00
City Blaine State MN Zip Code 55449	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Michelle Bachmann		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Barney Frank for Congress		Transaction ID: D734 Date of Disbursement 10 / 10 / 2006
Mailing Address P O Box 260		Amount of Each Disbursement this Period 5000.00
City Newtonville State MA Zip Code 02460	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Barney Frank		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Chocola for Congress		Transaction ID: D737 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 6728		Amount of Each Disbursement this Period 1500.00
City South Bend State IN Zip Code 46660	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Christopher Chocola		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Committee for the Preservation of Capitalism		Transaction ID: D758 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 65314		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20036		
Purpose of Disbursement Contr. Committee Capitalism		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Craig Foltin for Congress		Transaction ID: D770 Date of Disbursement 10 / 03 / 2006
Mailing Address PO Box 847		Amount of Each Disbursement this Period 1000.00
City Lorain	State OH	
Zip Code 44052		
Purpose of Disbursement Contr.		
Candidate Name Craig Foltin		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 13		

Full Name (Last, First, Middle Initial) C. David Scott for Congress		Transaction ID: D751 Date of Disbursement 10 / 10 / 2006
Mailing Address 225 Peachtree Street Suite 1205		Amount of Each Disbursement this Period 1000.00
City Atlanta	State GA	
Zip Code 30303		
Purpose of Disbursement Contr.		
Candidate Name David A. Scott		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 13		

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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Eric Cantor for Congress		Transaction ID: D733 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 17813		Amount of Each Disbursement this Period 2500.00
City Richmond	State VA	
Zip Code 23226		
Purpose of Disbursement Contr.		
Candidate Name Eric I. Cantor		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 07		

Full Name (Last, First, Middle Initial) B. Fitzpatrick for Congress		Transaction ID: D742 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 1772		Amount of Each Disbursement this Period 1000.00
City Doylestown	State PA	
Zip Code 18901		
Purpose of Disbursement Contr.		
Candidate Name Michael G. Fitzpatrick		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 08		

Full Name (Last, First, Middle Initial) C. Friends of Clay Shaw		Transaction ID: D744 Date of Disbursement 10 / 10 / 2006
Mailing Address 2600 NE 14th. Street Causeway		Amount of Each Disbursement this Period 1000.00
City Fort Lauderdale	State FL	
Zip Code 33303		
Purpose of Disbursement Contr.		
Candidate Name E. Clay Shaw, Jr.		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 22		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Friends of Dave Reichert		Transaction ID: D774 Date of Disbursement 10 / 03 / 2006
Mailing Address PO Box 53322		Amount of Each Disbursement this Period 1000.00
City Bellevue State WA Zip Code 98015	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name David George Reichert		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of George Allen		Transaction ID: D756 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 6859		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22206	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name George F. Allen		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of John Tanner		Transaction ID: D747 Date of Disbursement 10 / 10 / 2006
Mailing Address Post Office Box 1994		Amount of Each Disbursement this Period 2500.00
City Union City State TN Zip Code 38281	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name John S. Tanner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Gard for Congress		Transaction ID: D772 Date of Disbursement 10 / 03 / 2006
Mailing Address PO Box 277		Amount of Each Disbursement this Period 1000.00
City Greenbay	State WI Zip Code 54305	
Purpose of Disbursement Contr.		
Candidate Name John Gard		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI District: 01		

Full Name (Last, First, Middle Initial) B. Geoff Davis for Congress		Transaction ID: D743 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 17192		Amount of Each Disbursement this Period 1000.00
City Fort Mitchell	State KY Zip Code 41017	
Purpose of Disbursement Contr.		
Candidate Name Geoffrey Davis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District: 04		

Full Name (Last, First, Middle Initial) C. Gerlach for Congress		Transaction ID: D736 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 87		Amount of Each Disbursement this Period 1000.00
City Uwchland	State PA Zip Code 19480	
Purpose of Disbursement Contr.		
Candidate Name James W. Gerlach		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Hooley for Congress		Transaction ID: D749 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 2050		Amount of Each Disbursement this Period 1000.00
City Salem	State OR	
Zip Code 97308		
Purpose of Disbursement Contr.		
Candidate Name Darlene Hooley		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR District: 05		

Full Name (Last, First, Middle Initial) B. J D Hayworth for Congress		Transaction ID: D776 Date of Disbursement 10 / 03 / 2006
Mailing Address 10789 N 90th Street Suite 102		Amount of Each Disbursement this Period 1000.00
City Scottsdale	State AZ	
Zip Code 85260		
Purpose of Disbursement Contr.		
Candidate Name J.D. Hayworth		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 05		

Full Name (Last, First, Middle Initial) C. Jerry Weller for Congress		Transaction ID: D745 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 2368		Amount of Each Disbursement this Period 1000.00
City Joliet	State IL	
Zip Code 60434		
Purpose of Disbursement Contr.		
Candidate Name Gerald C. Weller		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 11		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Jon Kyl for US Senate 2006		Transaction ID: D757 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 10246		Amount of Each Disbursement this Period 1000.00
City Phoenix	State AZ	
Zip Code 85064		
Purpose of Disbursement Contr.		
Candidate Name Jon Kyl		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District:		

Full Name (Last, First, Middle Initial) B. Joy Padgett for Congress		Transaction ID: D771 Date of Disbursement 10 / 03 / 2006
Mailing Address 871 Walnut Street		Amount of Each Disbursement this Period 1000.00
City Coshocton	State OH	
Zip Code 43812		
Purpose of Disbursement Contr.		
Candidate Name Joy Padgett		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 18		

Full Name (Last, First, Middle Initial) C. Mark Kennedy for US Senate		Transaction ID: D748 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 49333		Amount of Each Disbursement this Period 1000.00
City Blain	State MN	
Zip Code 55449		
Purpose of Disbursement Contr.		
Candidate Name Mark R. Kennedy		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 06		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. McCrery for Congress Committee		Transaction ID: D730 Date of Disbursement 10 / 09 / 2006
Mailing Address 333 Texas Street, Suite 1900		Amount of Each Disbursement this Period 2500.00
City Shreveport State LA Zip Code 71135		
Purpose of Disbursement Contr.	Category/Type	
Candidate Name Jim McCrery		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mike Ross for Congress Committee		Transaction ID: D753 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 360		Amount of Each Disbursement this Period 1000.00
City Prescott State AR Zip Code 71857		
Purpose of Disbursement Contr.	Category/Type	
Candidate Name Michael A. Ross		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Moore for Congress		Transaction ID: D752 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 14631		Amount of Each Disbursement this Period 1000.00
City Lenexa State KS Zip Code 66285		
Purpose of Disbursement Contr.	Category/Type	
Candidate Name Dennis Moore		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Nancy Johnson for Congress		Transaction ID: D738 Date of Disbursement 10 / 10 / 2006
Mailing Address P.O. Box 1986		Amount of Each Disbursement this Period 1000.00
City New Britain State CT Zip Code 06050	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Nancy L. Johnson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Pennsylvanians for Kanjorski		Transaction ID: D735 Date of Disbursement 10 / 10 / 2006
Mailing Address 126 South Franklin Street		Amount of Each Disbursement this Period 1000.00
City Wilkes-Barre State PA Zip Code 18701	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Paul E. Kanjorski		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Porter for Congress		Transaction ID: D775 Date of Disbursement 10 / 03 / 2006
Mailing Address PO Box 26087		Amount of Each Disbursement this Period 1000.00
City Las Vegas State NV Zip Code 89126	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Jon C. Porter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Pryce for Congress		Transaction ID: D769 Date of Disbursement 10 / 03 / 2006
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 2500.00
City Columbus	State OH	
Zip Code 43215		
Purpose of Disbursement Contr. <input type="checkbox"/>		
Candidate Name Deborah Pryce		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 15		

Full Name (Last, First, Middle Initial) B. Pryce for Congress		Transaction ID: D732 Date of Disbursement 10 / 10 / 2006
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 2500.00
City Columbus	State OH	
Zip Code 43215		
Purpose of Disbursement Contr. <input type="checkbox"/>		
Candidate Name Deborah Pryce		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 15		

Full Name (Last, First, Middle Initial) C. Reynolds for Congress		Transaction ID: D741 Date of Disbursement 10 / 10 / 2006
Mailing Address 495 Commerce Drive Suite 1-A		Amount of Each Disbursement this Period 2500.00
City Amherst	State NY	
Zip Code 14228		
Purpose of Disbursement Contr. <input type="checkbox"/>		
Candidate Name Thomas M. Reynolds		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 26		

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Rogers for Congress		Transaction ID: D778 Date of Disbursement 10 / 18 / 2006
Mailing Address Post Office Box 581		Amount of Each Disbursement this Period 1000.00
City Brighton	State MI Zip Code 48116	
Purpose of Disbursement Contr.		
Candidate Name Michael J. Rogers		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 08		

Full Name (Last, First, Middle Initial) B. Ron Lewis for Congress		Transaction ID: D746 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 307		Amount of Each Disbursement this Period 1000.00
City Elizabethtown	State KY Zip Code 42702	
Purpose of Disbursement Contr.		
Candidate Name Ron Lewis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District: 02		

Full Name (Last, First, Middle Initial) C. Steve Israel for Congress		Transaction ID: D750 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 777		Amount of Each Disbursement this Period 1000.00
City Deer Park	State NY Zip Code 11729	
Purpose of Disbursement Contr.		
Candidate Name Steve J. Israel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 02		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
NAMIC PAC

Full Name (Last, First, Middle Initial) A. Sue Kelly for Congress		Transaction ID: D739 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 599		Amount of Each Disbursement this Period 2500.00
City Katonah	State NY	
Zip Code 10536		
Purpose of Disbursement Contr.		
Candidate Name Sue W. Kelly		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 19		

Full Name (Last, First, Middle Initial) B. Team Emerson		Transaction ID: D777 Date of Disbursement 10 / 18 / 2006
Mailing Address Attn: David S. Limbaugh, Treasurer PO Box 822		Amount of Each Disbursement this Period 1500.00
City Cape Girardeau	State MO	
Zip Code 63702-0822		
Purpose of Disbursement Contr.		
Candidate Name Jo Ann Emerson		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO District: 08		

Full Name (Last, First, Middle Initial) C. The Freedom Project		Transaction ID: D754 Date of Disbursement 10 / 10 / 2006
Mailing Address 509 7th Street, NW		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20004		
Purpose of Disbursement Contr. Freedom Project, The		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	9000.00
TOTAL This Period (last page this line number only)	59500.00