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FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

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

American College of Rheumatology (RheumRAC)

ADDRESS (number and street) 1800 Century Place

Check If different than previously reported. (ACC) Suite 250

Atlanta GA 30345 - 4300

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

C00432823

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

4. TYPE OF REPORT (Choose One)

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

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

(c) 12-Day PRE-Election Report for the:
Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)
Election on ... in the State of ...

(d) 30-Day POST-Election Report for the:
General (30G)
Runoff (30R)
Special (30S)
Election on 11/26/2008 in the State of ...

5. Covering Period 10/01/2008 through 11/24/2008

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

Type or Print Name of Treasurer Fred Dietz

Signature of Treasurer [Handwritten Signature] Date 12/03/2008

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 [Grid] FEC FORM 3X Rev. 12/2004

28039940554

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Rheumatology (RheumPAC)

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 10 / 01 / 2008 To: ^{M M / D D / Y Y Y Y} 11 / 24 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^{Y Y Y Y} 2008		\$22,124.92
(b) Cash on Hand at Beginning of Reporting Period.....	\$39,510.41	
(c) Total Receipts (from Line 19).....	\$6,770.61	\$33,956.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	\$46,281.02	\$56,081.54
7. Total Disbursements (from Line 31).....	\$112.52	\$9,913.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	\$46,168.50	\$46,168.50
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

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DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American College of Rheumatology (RheumPAC)

Report Covering the Period: From: 10 / 01 / 2008 To: 11 / 24 / 2008

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).....	\$5,500.00	\$24,900.00
(ii) Unitemized.....	\$1,085.00	\$7,934.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	\$6,585.00	\$32,834.00
(b) Political Party Committees.....	\$0.00	\$0.00
(c) Other Political Committees (such as PACs).....	\$0.00	\$0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	\$6,585.00	\$32,834.00
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	\$937.01
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	\$0.00	\$0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	\$185.61	\$185.61
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	\$0.00	\$0.00
(b) Levin Funds (from Schedule H5).....	\$0.00	\$0.00
(c) Total Transfers (add 18(a) and 18(b))..	\$0.00	\$0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	\$6,770.61	\$33,956.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	\$6,770.61	\$33,956.62

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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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	\$0.00	\$0.00
(ii) Non-Federal Share	\$0.00	\$0.00
(b) Other Federal Operating Expenditures	\$0.00	\$0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	\$0.00	\$0.00
22. Transfers to Affiliated/Other Party Committees	\$0.00	\$0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$0.00	\$9,000.00
24. Independent Expenditures (use Schedule E)	\$0.00	\$0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	\$0.00	\$0.00
26. Loan Repayments Made	\$0.00	\$0.00
27. Loans Made	\$0.00	\$0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$105.00
(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	\$105.00
29. Other Disbursements	\$112.52	\$808.04
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	\$0.00	\$0.00
(ii) "Levin" Share	\$0.00	\$0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	\$0.00	\$0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	\$0.00	\$0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	\$112.52	\$9,913.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	\$112.52	\$9,913.04

28039940557

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	\$6,585.00	\$32,834.00
34. Total Contribution Refunds (from Line 28(d))	\$0.00	\$105.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	\$6,585.00	\$32,729.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	\$0.00	\$0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	\$0.00	\$937.01
38. Net Operating Expenditures (subtract Line 37 from Line 36)	\$0.00	(\$937.01)

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**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 1 OF 5
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15

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)
American College of Rheumatology (RheumPAC)

Full Name (Last, First, Middle Initial) A. Kent Kwoh		Date of Receipt 10 / 10 / 2008
Mailing Address 316 Wildberry Road		Amount of Each Receipt this Period \$500.00
City Pittsburgh	State Zip Code PA 15238	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$500.00
Name of Employer University of Pittsburgh	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ \$500.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Tindall		Date of Receipt 10 / 13 / 2008
Mailing Address 1255 SW Schaeffer Rd		Amount of Each Receipt this Period \$500.00
City West Linn	State Zip Code OR 97068	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$500.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ \$500.00	

Full Name (Last, First, Middle Initial) C. Evelyn Hess		Date of Receipt 10 / 20 / 2008
Mailing Address 2916 Grandin Road		Amount of Each Receipt this Period \$400.00
City Cincinnati	State Zip Code OH 45208	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$400.00
Name of Employer Un Cincinnati Medical School	Occupation Physician and Rheumatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ \$400.00	

SUBTOTAL of Receipts This Page (optional)	\$1,400.00
TOTAL This Period (last page this line number only)	

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**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 2 OF 5
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Rheumatology (RheumPAC)

Full Name (Last, First, Middle Initial) A. Timothy Laing		Date of Receipt 10 / 21 / 2008
Mailing Address 5522 Warren Road		Amount of Each Receipt this Period \$500.00
City Ann Arbor	State Zip Code MI 48105	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Michigan	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ \$500.00	

Full Name (Last, First, Middle Initial) B. James Engelbrecht		Date of Receipt 10 / 21 / 2008
Mailing Address 4281 Rosemary Lane		Amount of Each Receipt this Period \$250.00
City Rapid City	State Zip Code SD 57702	
FEC ID number of contributing federal political committee. C		
Name of Employer Black Hills Orth and Spine Cen	Occupation Physician	
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) C. Audrey Nelson		Date of Receipt 10 / 21 / 2008
Mailing Address 2105 Valkyrie Dr. NW		Amount of Each Receipt this Period \$250.00
City Rochester	State Zip Code MN 55901	
FEC ID number of contributing federal political committee. C		
Name of Employer Mayo Clinic Retired	Occupation Physician	
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)	\$1,000.00
TOTAL This Period (last page this line number only)	

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**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 3 OF 5	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American College of Rheumatology (RheumPAC)

Full Name (Last, First, Middle Initial) A. David Borenstein		Date of Receipt 10 / 26 / 2008	
Mailing Address 10505 Scarboro Lane		Amount of Each Receipt this Period \$500.00	
City Potomac	State MD		Zip Code 20850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$1,000.00	
Name of Employer Arthritis and Rheumatism Assoc	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ \$1,000.00		

Full Name (Last, First, Middle Initial) B. Cody Wasner		Date of Receipt 10 / 26 / 2008	
Mailing Address 1310 Coburg Rd		Amount of Each Receipt this Period \$200.00	
City Eugene	State OR		Zip Code 37401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$250.00	
Name of Employer Self-Employed	Occupation Physician		
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) C. Gerald Eisenberg		Date of Receipt 10 / 27 / 2008	
Mailing Address 2003 Old Briar Road		Amount of Each Receipt this Period \$1,000.00	
City Highland Park	State IL		Zip Code 60035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$1,000.00	
Name of Employer Illinois Bone and Joint Instit	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ \$1,000.00		

SUBTOTAL of Receipts This Page (optional)	\$1,700.00
TOTAL This Period (last page this line number only)	

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**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 4 OF 5
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Rheumatology (RheumPAC)

Full Name (Last, First, Middle Initial) A. Alex Limanni		Date of Receipt 10 / 28 / 2008
Mailing Address 9201 Westeind Ct		Amount of Each Receipt this Period \$400.00
City Dallas	State Zip Code TX 75231	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date \$400.00
Name of Employer Arthritis Centers of Texas	Occupation Rheumatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Melvin Britton		Date of Receipt 11 / 04 / 2008
Mailing Address 167 Toyon Road		Amount of Each Receipt this Period \$500.00
City Attiernton	State Zip Code CA 94027	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date \$500.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John A Goldman		Date of Receipt 11 / 23 / 2008
Mailing Address 5800 Timberlane Terrace		Amount of Each Receipt this Period \$250.00
City Atlanta	State Zip Code GA 30328	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date \$250.00
Name of Employer John A Gold MAN MD PC	Occupation Rheumatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	\$1,150.00
TOTAL This Period (last page this line number only)	

28039940562

**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 5 OF 5	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American College of Rheumatology (RheumPAC)

Full Name (Last, First, Middle Initial) A. Ronald E Krauser		Date of Receipt 11 / 24 / 2008	
Mailing Address 35 Broad Leaf Trail		Amount of Each Receipt this Period \$250.00	
City Malvern	State PA	Zip Code 19355	
FEC ID number of contributing federal political committee. C			
Name of Employer Ronald E Krauser, MD, PC	Occupation Physician		
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.		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional)	\$250.00
TOTAL This Period (last page this line number only)	\$5,500.00

28039940563

**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 1 OF 1

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

American College of Rheumatology (RheumPAC)

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement	
Visa and Mastercard		M M / D D / Y Y	
Mailing Address		10 / 10 / 2008	
City	State	Zip Code	
	??		
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		, , \$22.17	
Office Sought:	Disbursement For:	Category/Type	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001	
State:	District:		

B.		Date of Disbursement	
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		, , " "	
Office Sought:	Disbursement For:	Category/Type	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

C.		Date of Disbursement	
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		, , " "	
Office Sought:	Disbursement For:	Category/Type	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	, , \$22.17
TOTAL This Period (last page this line number only)	, , \$22.17

28039940564

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>12/3/08</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER
 (3/2005)

12/4/08
 DATE PREPARED

28039940565