

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 Aircraft Owners and Pilots Association Political Action Committee

ADDRESS (number and street) 421 Aviation Way Check if different than previously reported. (ACC) Frederick MD 21701

2. FEC IDENTIFICATION NUMBER C00131185 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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 PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 11 01 2007 through 11 30 2007

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 Roger C. Myers, Jr. Signature of Treasurer Electronically Filed by Roger C. Myers, Jr. Date 12 11 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Aircraft Owners and Pilots Association Political Action Committee

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		1052193.44
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	1514415.77									
(c) Total Receipts (from Line 19) .....	54353.27	1723913.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1568769.04	2776106.64								
7. Total Disbursements (from Line 31) .....	51683.02	1259020.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1517086.02	1517086.02								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	648.46									

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  
Aircraft Owners and Pilots Association Political Action Committee

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	21927.00	446223.11
(i) Itemized (use Schedule A) .....	31872.00	1246315.28
(ii) Unitemized .....	53799.00	1692538.39
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	53799.00	1692538.39
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.) .....	554.27	31374.81
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)) .....	54353.27	1723913.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	54353.27	1723913.20

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	16683.02	472575.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	16683.02	472575.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	755500.00
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	30945.04
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))..	51683.02	1259020.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	51683.02	1259020.62

**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) .....	53799.00	1692538.39
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	53799.00	1692538.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16683.02	472575.58
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16683.02	472575.58

**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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. JACK CHAMBERLAIN</b>		Date of Receipt MM / DD / YYYY 11 / 19 / 2007
Mailing Address 1165 WESTRIDGE DR		<b>Transaction ID: 22653945</b>
City PORTOLA VALLEY	State CA	Zip Code 94028-7340
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00	
Name of Employer THE CHAMBERLAIN GROUP	Occupation REAL ESTATE DEVELOPE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN KNIPF</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2007
Mailing Address 10821 SE SKYLINE DR		<b>Transaction ID: 22653952</b>
City SANTA ANA	State CA	Zip Code 92705-2415
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00	
Name of Employer CALIFORNIA PROACTIVE SALES INC	Occupation PRESIDENT/CEO	
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>C. SESHADRI RAJU, MD</b>		Date of Receipt MM / DD / YYYY 11 / 12 / 2007
Mailing Address 2223 EASTOVER DR		<b>Transaction ID: 22653953</b>
City JACKSON	State MS	Zip Code 39211-6722
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00	
Name of Employer SESHADRI RAJUE MD	Occupation SURGEON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> 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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
ROBERT TOXEN

Mailing Address 4642 BENTLEY PL

City State Zip Code  
DULUTH GA 30096-6125

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

Name of Employer Occupation  
FLY BY DAY CONSULTING INL COMPUTER SECURITY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2007

Transaction ID: 22653963

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
RICHARD CHAGNON

Mailing Address 4120 CASTERSON CT

City State Zip Code  
PLEASANTON CA 94566-7534

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

Name of Employer Occupation  
MONARCH LEASING INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2007

Transaction ID: 22653968

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
RICHARD CANDLER

Mailing Address 1038 MILL CREEK MNR NE

City State Zip Code  
ATLANTA GA 30319-1980

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

Name of Employer Occupation  
CANDLER DEVELOPMENT CO REAL ESTATE DEVELOP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2007

Transaction ID: 22653970

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> 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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
JEFFREY FRIEDMAN

Mailing Address 12074 BROADWAY TER

City OAKLAND State CA Zip Code 94611-1957

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

Name of Employer SELF Occupation DOCTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: 22653974

Amount of Each Receipt this Period  
525.00

**B.** Full Name (Last, First, Middle Initial)  
MS MARGERY GANS

Mailing Address 9 OSSIPEE RD

City SOMERVILLE State MA Zip Code 02144-1609

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

Name of Employer HARVARD UNIV Occupation PSYCHOLOGIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 7

Transaction ID: 22653987

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
FRED LOWEN

Mailing Address 1852 TEXAS HILL RD

City HINESBURG State VT Zip Code 05461-9559

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

Name of Employer SELF Occupation PROPERTY MANAGEMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 7

Transaction ID: 22653997

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	725.00
<b>TOTAL</b> 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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
CHARLES MINGUEZ

Mailing Address 1078 HILLTOP RD

City State Zip Code  
LEESPORT PA 19533-9350

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

Name of Employer Occupation  
FOX BINPERY CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 7

Transaction ID: 22654026

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
GREG ANDERSON

Mailing Address 3660 BECKET DR

City State Zip Code  
CHESTERFIELD VA 23832-8501

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

Name of Employer Occupation  
QUEBECOR WORLD MACHINE SHOP SUPERVI

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 22654030

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
STEPHEN LUBARD

Mailing Address 4812 DON JUAN PL

City State Zip Code  
WOODLAND HILLS CA 91364-4704

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

Name of Employer Occupation  
S L TECH LLC TECHNICAL MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: 22654039

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
HARRY STOWERS, JR

Mailing Address 8733 INLET DR

City State Zip Code  
KNOXVILLE TN 37922-6459

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

Name of Employer Occupation  
STOWERS MACHINERY CORP CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 2 / 2 0 0 7

**Transaction ID:** 22654044

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
ARTHUR BUCKELEW

Mailing Address 977 JEANETTE AVE

City State Zip Code  
THOUSAND OAKS CA 91362-2325

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

Name of Employer Occupation  
DELTA AIR LINES PILOT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 8 / 2 0 0 7

**Transaction ID:** 22654051

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
JAMES MCCABE

Mailing Address PO BOX 869

City State Zip Code  
SHELTON WA 98584-0869

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

Name of Employer Occupation  
JIM AUTO INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

**Transaction ID:** 22654077

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> 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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. DAVID FOWLER</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 10102 NORTE MESA DR		<b>Transaction ID: 22654082</b>	
City State Zip Code SPRING VALLEY CA 91977-3138		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AHSEC LLC CONSULTING FIELD ENG			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>B. PAUL JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 7	
Mailing Address 6830 N LOST DUTCHMAN DR		<b>Transaction ID: 22654095</b>	
City State Zip Code PARADISE VALLEY AZ 85253-3452		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation SELF REAL ESTATE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MR R BAKLARZ</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 7	
Mailing Address PO BOX 79321		<b>Transaction ID: 22654096</b>	
City State Zip Code HOUSTON TX 77279-9321		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CHRISLER CO ENGINEER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> 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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. R CULVER</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 2211 U ST		<b>Transaction ID: 22654105</b>	
City State Zip Code SACRAMENTO CA 95818-1727		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CULVER ARMATURE AND MOTOR 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>B. ENNIO SENIA</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 146 SENDERO VERDE		<b>Transaction ID: 22654134</b>	
City State Zip Code SAN ANTONIO TX 78261		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM HALL</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 5354 SW WESTWOOD LN		<b>Transaction ID: 22654154</b>	
City State Zip Code PORTLAND OR 97239-2765		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> 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 13 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
JAMIE WALLACE

Mailing Address 6851 W STEGER RD

City State Zip Code  
FRANKFORT IL 60423-6012

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

Name of Employer NONE PROVIDED Occupation NONE PROVIDED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Transaction ID: 22654155

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
C PHELPS

Mailing Address 15842 DUQUESNE CIR

City State Zip Code  
BRIGHTON CO 80603-3855

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

Name of Employer STATE OF COLORADO Occupation DIST COURT JUDGE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 7

Transaction ID: 22654162

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR DON MOSS

Mailing Address PO BOX 90094

City State Zip Code  
CITY OF INDUSTRY CA 91715-0094

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

Name of Employer LAUSD Occupation GARAGE SUPERVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 9 / 2 0 0 7

Transaction ID: 22654165

Amount of Each Receipt this Period  
50.00

**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 14 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. JEWEL DIXON</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 7
Mailing Address 612 CAMPBELL DR		<b>Transaction ID: 22654169</b>
City LAS VEGAS	State NV	Zip Code 89107
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer BACELONA HOTEL CASINO	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM MUDGE</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 7
Mailing Address 6334 E VIEWMONT DR UNIT 37		<b>Transaction ID: 22654172</b>
City MESA	State AZ	Zip Code 85215-7783
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 75.00
Name of Employer NONE PROVIDED	Occupation NONE PROVIDED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. CURTIS MATTESON</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address 2940 NW HIGHLAND DR		<b>Transaction ID: 22654174</b>
City CORVALLIS	State OR	Zip Code 97330-3635
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer TAKTOS LTD	Occupation PRES DATA PROCESSING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	275.00
<b>TOTAL</b> 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 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. TIM RABBITT</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 136 DOUBLE EAGLE DR		<b>Transaction ID: 22654180</b>	
City State Zip Code AUSTIN TX 78738-1302		Amount of Each Receipt this Period 130.00	
FEC ID number of contributing federal political committee. C			
Name of Employer NONE PROVIDED		Occupation NONE PROVIDED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL WIEDERSTEIN</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 9120 TRUMBAUER WAY		<b>Transaction ID: 22654190</b>	
City State Zip Code ELK GROVE CA 95758-7434		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer TELCAVE CORPORATION		Occupation DONATIONS OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. ROBERT HENSHEL</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 4014 AMARANTA AVE		<b>Transaction ID: 22654230</b>	
City State Zip Code PALO ALTO CA 94306-3101		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	380.00
<b>TOTAL</b> 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 16 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
FRED BERRY, JR

Mailing Address PO BOX 829

City State Zip Code  
WICHITA KS 67201-0829

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

Name of Employer Occupation  
BERRY COMPANIES, INC BUS.EXEC., PILOT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 7

Transaction ID: 22654232

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR MATTHEW WALLACE

Mailing Address PO BOX 91  
11TH STREET & LOSURE

City State Zip Code  
SAC CITY IA 50583-0091

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

Name of Employer Occupation  
BUNTROCK SALIE PHOTOS

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: 22654243

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR ANDREW DETSCH

Mailing Address 2815 CHERRY ST

City State Zip Code  
BERKELEY CA 94705-2309

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

Name of Employer Occupation  
SELF EMPLOYED LAND ARCHITECHT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 7

Transaction ID: 22654258

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> 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 17 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
STEVENS PEARCE

Mailing Address 106 CITATION CIR

City State Zip Code  
DURHAM NC 27704-3958

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

Name of Employer Occupation  
NOVO NORDISK SCIENTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 7

Transaction ID: 22654267

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
PETER RADDING

Mailing Address 4290 CLUB COURSE DR

City State Zip Code  
CHARLESTON SC 29420-7506

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4615.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 22654272

Amount of Each Receipt this Period  
1540.00

**C.** Full Name (Last, First, Middle Initial)  
WILLIAM JAGODA

Mailing Address 43 DERBY RD

City State Zip Code  
ROCKFALL CT 06481-2022

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

Name of Employer Occupation  
GENERAL DYNAMICS ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: 22654276

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1690.00
<b>TOTAL</b> 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 18 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
WILLIAM STONEMAN

Mailing Address 3101 MOUNTAIN VIEW AVE N

City RENTON State WA Zip Code 98056-2514

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2007

Transaction ID: 22654281

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR GREGORY D BOYER

Mailing Address 125 1/2 W 2ND ST

City WAVERLY State OH Zip Code 45690-1305

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

Name of Employer BOYER FUNERAL HOME Occupation FUNERAL DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2007

Transaction ID: 22654286

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
JOEL DENNING

Mailing Address 5646 BALLS MILL RD

City MIDLAND State VA Zip Code 22728-1905

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

Name of Employer LOCKHEED MARTIN Occupation FIELD ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2007

Transaction ID: 22654291

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> 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 19 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. GUILLERMO ZULOGA</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 13635 DEERING BAY DR APT 244		<b>Transaction ID: 22654301</b>	
City State Zip Code CORAL GABLES FL 33158-2850		Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation GLOBOVISION TELE PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) <b>B. H ZENTNER</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 7	
Mailing Address 3852 26TH AVE W		<b>Transaction ID: 22654309</b>	
City State Zip Code SEATTLE WA 98199-1550		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. MARK GLUSZEK</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 234 BOBCAT LN		<b>Transaction ID: 22654314</b>	
City State Zip Code REDSTONE CO 81623-9441		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation SELF CONTRACTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	950.00
<b>TOTAL</b> 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 20 / 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
HENRY MASSERY

Mailing Address PO BOX 118

City State Zip Code  
ELGIN IL 60121-0118

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2007

**Transaction ID:** 22654315

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD LAWSON

Mailing Address 1850 N PEACEFUL MESA DR

City State Zip Code  
PRESCOTT AZ 86305-5107

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

Name of Employer Occupation  
NONE PROVIDED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** 22654320

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL ZELTKEVIC

Mailing Address OLIVER WYMAN AND CO  
99 PARK AVE

City State Zip Code  
NEW YORK NY 10016-1503

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

Name of Employer Occupation  
OLIVER WYMAN MANAGEMENT CONSULTAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
11 / 27 / 2007

**Transaction ID:** 22654324

Amount of Each Receipt this Period  
450.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>575.00</b>
<b>TOTAL</b> 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 21 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. GUILLERMO ROSSELL</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 641 5TH AVE APT 29G		<b>Transaction ID: 22654325</b>	
City NEW YORK	State NY	Zip Code 10022-5908	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE PROVIDED	Occupation INVESTMENT ADVISOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. JEFF AND JULIE OERDING</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7	
Mailing Address 366 SE 10TH AVE		<b>Transaction ID: 22654328</b>	
City CANBY	State OR	Zip Code 97013-7751	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer MILES CHEVROLET	Occupation OFFICE MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. TERRANCE TAYLOR</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Mailing Address W4020 GLEN FERN LN		<b>Transaction ID: 22654340</b>	
City LAKE GENEVA	State WI	Zip Code 53147-3767	Amount of Each Receipt this Period 115.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE PROVIDED	Occupation NONE PROVIDED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	315.00
<b>TOTAL</b> 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 22 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. JOHN WEST</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 7
Mailing Address 10710 W SARATOGA PL		<b>Transaction ID: 22654344</b>
City LITTLETON	State CO	Zip Code 80127
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 75.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. MR JOHN BRANTIGAN, MD</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 7
Mailing Address 2526 NECK POINT RD PO BOX 106		<b>Transaction ID: 22654347</b>
City SHAW ISLAND	State WA	Zip Code 98286-0106
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00	
Name of Employer DOCTOR	Occupation DOCTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. ALAN GAUDENTI</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7
Mailing Address 87 HILLTOP CIR		<b>Transaction ID: 22654349</b>
City RCH PALOS VRD	State CA	Zip Code 90275
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 360.00	
Name of Employer GS BROTHERS, INC	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	585.00
<b>TOTAL</b> 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 23 / 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
JOHN POWERS

Mailing Address 206 W HARDING AVE

City State Zip Code  
GREENWOOD MS 38930-3048

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

Name of Employer Occupation  
RC CONSTRUCTIN CO INC CONTRACTOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

**Transaction ID:** 22654359

Amount of Each Receipt this Period  
90.00

**B.** Full Name (Last, First, Middle Initial)  
DR DR MIKE ZINDRICK

Mailing Address 6600 SHADY LN

City State Zip Code  
BURR RIDGE IL 60527-5713

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

Name of Employer Occupation  
HINSDALE ORTHOPAEDIC ASSO- CIATES SURGEON

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

**Transaction ID:** 22654361

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
COY AUSTIN

Mailing Address PO BOX 650639

City State Zip Code  
VERO BEACH FL 32965-0639

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

Name of Employer Occupation  
RETIRED CORPORATE PILOT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

**Transaction ID:** 22654362

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1090.00
<b>TOTAL</b> 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 24 / 53		
	<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

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ROBERT DEUKER</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 2354 MIDDLECROFT DR		<b>Transaction ID: 22654373</b>	
City State Zip Code BURTON MI 48509-1368	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation ENGINEER		
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>B. BETTY BUCCI</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7	
Mailing Address 951 STONE BRIDGE TRL		<b>Transaction ID: 22654380</b>	
City State Zip Code HOLLISTER CA 95023-9196	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer IBM	Occupation SOFTWARE ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. WALTER BRAY</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Mailing Address PO BOX 118		<b>Transaction ID: 22654384</b>	
City State Zip Code LAMESA TX 79331	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> 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 25 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ALLAN ARMSTRONG</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 7
Mailing Address 43 JACKSON ST UNIT B4		<b>Transaction ID: 22654386</b>
City ESSEX JUNCTION State VT Zip Code 05452-3730	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED IBM CORP Occupation RETIRED	Aggregate Year-to-Date ▼ 550.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. DANIEL DEDONA</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 12036 MENTZER GAP RD		<b>Transaction ID: 22654406</b>
City WAYNESBORO State PA Zip Code 17268-8239	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer ALION SCIENCE & TECHNOLOG-IES Occupation CONTRACTOR	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DONALD MAZIARZ</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 7 / 2 0 0 7
Mailing Address 5164 CLASTON CT		<b>Transaction ID: 22654407</b>
City WARRENTON State VA Zip Code 20187-2634	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NONE PROVIDED Occupation NONE PROVIDED	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> 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 26 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. SCOTT LIMBACHER</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 7	
Mailing Address 8319 PAISLEY AVE		<b>Transaction ID: 22654424</b>	
City State Zip Code HESPERIA CA 92345-7125	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation STATER BROS MARKETS VP CONST MAINT	Aggregate Year-to-Date ▼ 513.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. JONATHAN JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 9307 ARROWHEAD TRACE LN		<b>Transaction ID: 22654430</b>	
City State Zip Code HOUSTON TX 77089-5839	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation MAJOR AIRLINE AIRCRAFT TECH	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MR J HUCK</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 7	
Mailing Address 233 LIONS HILL RD		<b>Transaction ID: 22654437</b>	
City State Zip Code STATE COLLEGE PA 16803-1860	Amount of Each Receipt this Period 1437.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED RETIRED	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1787.00
<b>TOTAL</b> 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 27 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. DAVID WEIR</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 7	
Mailing Address 1210 2ND ST		<b>Transaction ID: 22654446</b>	
City MANHATTAN BEACH	State CA	Zip Code 90266	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer DYNAMX RESEARCH INC	Occupation ENGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. ROBERT JONES</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 7	
Mailing Address 3203 W FREMONT AVE		<b>Transaction ID: 22654448</b>	
City FRESNO	State CA	Zip Code 93711-1016	Amount of Each Receipt this Period 135.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation FARMER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>C. PAUL HUNTER</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7	
Mailing Address 4510 W SYLVAN RAMBLE ST		<b>Transaction ID: 22654455</b>	
City TAMPA	State FL	Zip Code 33609-4214	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer GRAND PRIX LTD	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	285.00
<b>TOTAL</b> 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 28 / 53  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
SCOTT TALIAFERRO, JR  
 Mailing Address PO BOX 240  
 City State Zip Code  
 ABILENE TX 79604-0240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SCOTT OILS INC CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 536.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 7 / 2 0 0 7  
**Transaction ID: 22654479**  
 Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
CLAY SCHILE  
 Mailing Address 955 ROCHESTER HWY  
 City State Zip Code  
 SENECA SC 29672-7041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GE ENGR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7  
**Transaction ID: 22654483**  
 Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
EDWARD BARILI  
 Mailing Address 67 WALKUP RD  
 City State Zip Code  
 LAKE GEORGE NY 12845-4500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 7 / 2 0 0 7  
**Transaction ID: 22654490**  
 Amount of Each Receipt this Period  
 180.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **430.00**  
**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 29 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
MR GARY SPARKS

Mailing Address 133 NE 127TH AVE

City State Zip Code  
PORTLAND OR 97230-2132

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

Name of Employer Occupation  
SELF EMPLOYED FLIGHT INSTR AFP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 7

**Transaction ID: 22654493**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
JUDIE NESMITH

Mailing Address 61579 WESTRIDGE AVE

City State Zip Code  
BEND OR 97702-1905

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

Name of Employer Occupation  
PALADIN DATA CORP V PRES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

**Transaction ID: 22654498**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR HAL STANILOFF

Mailing Address 14 INDIAN VALLEY RD

City State Zip Code  
SETAUKET NY 11733-4071

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

Name of Employer Occupation  
SELF COMPUTER CONSULT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

**Transaction ID: 22654503**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> 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 30 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
WILLIAM GOFF

Mailing Address 7035 HINSON ST

City State Zip Code  
LAS VEGAS NV 89118-5115

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

Name of Employer Occupation  
ANCHOR DEVELOPMENT, INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2007

Transaction ID: 22654512

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
JAMES DUNN

Mailing Address 5065 CLARK STATE RD

City State Zip Code  
COLUMBUS OH 43230-2205

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

Name of Employer Occupation  
PLASKOLITE INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2007

Transaction ID: 22654515

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
JAMES DOYLE

Mailing Address 2215 CALIFORNIA LN

City State Zip Code  
ARLINGTON TX 76015-1106

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

Name of Employer Occupation  
SELF PLASTIC SURGEON

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2007

Transaction ID: 22654527

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	625.00
<b>TOTAL</b> 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 31 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
MURRAY KUCHERAWY

Mailing Address 260 BAY ST APT 207

City State Zip Code  
SAN FRANCISCO CA 94133-1927

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

Name of Employer Occupation  
SENDMAZY INC SOFTWARE ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

**Transaction ID:** 22654531

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
RICHARD COMPTON

Mailing Address 3218 CAMPANIL DR

City State Zip Code  
SANTA BARBARA CA 93109-1015

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

Name of Employer Occupation  
NUSIL, CARPINTERIA CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 915.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

**Transaction ID:** 22654535

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
K JEFFERTS

Mailing Address PO BOX 427

City State Zip Code  
SHAW ISLAND WA 98286-0427

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

Name of Employer Occupation  
NW MARINE TECHNOLOGY INC EXECUTIVE  
SHAW ISLAND W

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

**Transaction ID:** 22654554

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> 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 32 / 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
MR MICHAEL DUNAWAY

Mailing Address 955 S ANDREASEN DR

City State Zip Code  
ESCONDIDO CA 92029-1934

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

Name of Employer Occupation  
POLESTAR LABS INC CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2007

**Transaction ID:** 22654558

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
LYLE SIMPSON

Mailing Address 12525 GREENE AVE

City State Zip Code  
LOS ANGELES CA 90066-6434

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2007

**Transaction ID:** 22654569

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
EDWARD ROGALIN

Mailing Address 6330 SW 166TH PL

City State Zip Code  
BEAVERTON OR 97007-6258

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

Name of Employer Occupation  
UNEMPLOYED UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2007

**Transaction ID:** 22654578

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> 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 33 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. BRIAN FLAX</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 8672 MAPLE CREEK CV		<b>Transaction ID: 22654589</b>	
City GERMANTOWN	State TN	Zip Code 38139-6437	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer FEDERAL EXPRESS CORP	Occupation PILOT		
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>B. RONALD VANDERVORT</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Mailing Address 10650 CONTACT CT NW		<b>Transaction ID: 22654595</b>	
City SILVERDALE	State WA	Zip Code 98383-9215	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. DAVID GIBBS</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 23953 ARROYO PARK DR UNIT 157		<b>Transaction ID: 22654605</b>	
City VALENCIA	State CA	Zip Code 91355-2020	Amount of Each Receipt this Period 175.00
FEC ID number of contributing federal political committee. C			
Name of Employer CROSSBOW HELICOPTERS INC	Occupation SELF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> 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 34 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. DAVID SNEGOCKI</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 7	
Mailing Address 216 TILTON PARK DR		<b>Transaction ID: 22654607</b>	
City State Zip Code DEKALB IL 60115-1942	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NONE PROVIDED	Occupation NONE PROVIDED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) <b>B. A HOLADAY</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
Mailing Address 46 CAMINO BARRANCA		<b>Transaction ID: 22654616</b>	
City State Zip Code PLACITAS NM 87043-9314	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. MARY COMPTON</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 3218 CAMPANIL DR		<b>Transaction ID: 22654621</b>	
City State Zip Code SANTA BARBARA CA 93109	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation HOUSEWIFE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> 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 35 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. B/GEN ROBERT HOLT</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 984 DONNER WAY		<b>Transaction ID: 22654630</b>	
City State Zip Code SALT LAKE CITY UT 84108-2100		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>B. TIM COSTELLO</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 7	
Mailing Address PO BOX 681		<b>Transaction ID: 22654635</b>	
City State Zip Code TALKEETNA AK 99676-0681		Amount of Each Receipt this Period 450.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation TICON RESTAURANT EQUIPMENT SALES/ OWNER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>C. JAMES REYNER</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 7	
Mailing Address 3074 MCKINLEY DR		<b>Transaction ID: 22654645</b>	
City State Zip Code SANTA CLARA CA 95051-6813		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation SKYFIT AVIATION SERVICES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	825.00
<b>TOTAL</b> 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 36 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
MR PAUL BARRINGER

Mailing Address 14 S CALIBOGUE CAY RD

City State Zip Code  
HILTON HEAD SC 29928

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

Name of Employer Occupation  
COASTAL LUMBER COMP CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

**Transaction ID:** 22654650

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOHN MEAGHER, JR

Mailing Address 30 N DUNE LOOP

City State Zip Code  
SOUTHERN SHORES NC 27949-9016

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

Name of Employer Occupation  
WINS RADIO-NYC ADVERTISING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

**Transaction ID:** 22654654

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
DONALD LANDOLL

Mailing Address 1201 N 16TH ST

City State Zip Code  
MARYSVILLE KS 66508

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

Name of Employer Occupation  
LANDOLL CORP BUSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 7

**Transaction ID:** 22654661

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	675.00
<b>TOTAL</b> 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 37 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. HASSO WILSON</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 11101 IMPERIAL HWY SPC 102		<b>Transaction ID: 22654663</b>	
City NORWALK      State CA      Zip Code 90650-0103	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. MR M HUCKEMEYER</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 7	
Mailing Address 517 ASBY LN		<b>Transaction ID: 22654667</b>	
City MOREHEAD CITY      State NC      Zip Code 28557-3136	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer THOMAS SIMPSON CONSTRUCTION	Occupation GENERAL CONTRACTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. MR RICHARD CICCONE</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7	
Mailing Address 102902 E TRIPPLE VISTA DR		<b>Transaction ID: 22654673</b>	
City KENNEWICK      State WA      Zip Code 99338-9168	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer US ARMY	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> 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 38 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
RONALD WALLACE

Mailing Address PO BOX 221797

City State Zip Code  
EL PASO TX 79913-4797

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

Name of Employer Occupation  
MISSION CHEVROLET AUTO DEALER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

**Transaction ID:** 22654683

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
JAMES FOERSTER

Mailing Address 5937 SARAH CT

City State Zip Code  
CARMICHAEL CA 95608-5554

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

Name of Employer Occupation  
NONE PROVIDED NONE PROVIDED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

**Transaction ID:** 22654705

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
FREDERICK BROWN

Mailing Address 807 179TH CT NE

City State Zip Code  
BELLEVUE WA 98008

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 7

**Transaction ID:** 22654711

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> 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 39 / 53						
	(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

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. DANIEL NESMITH</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 7	
Mailing Address 61579 WESTRIDGE AVE		<b>Transaction ID: 22654712</b>	
City State Zip Code BEND OR 97702	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NONE PROVIDED	Occupation NONE PROVIDED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. ALAN PHILLIPS</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 12102 W MORGAN DR		<b>Transaction ID: 22654722</b>	
City State Zip Code HOUSTON TX 77065-1427	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ALLIANCE ENGINEERING	Occupation ELECTRICAL ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) <b>C. ROBERT NORTON</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 7625 SW 131ST AVE		<b>Transaction ID: 22654726</b>	
City State Zip Code BEAVERTON OR 97008-6220	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> 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 40 / 53
	<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. CLAUDE VON PLATO</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 8212 FOXHALL DR		<b>Transaction ID: 22654727</b>	
City HUNTINGTON BEACH	State CA	Zip Code 92646-6728	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer YAMAHA MOTOR CORP, USA	Occupation DIVISION MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. GEORGE WYCKOFF</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 7	
Mailing Address 2360 LAKE FOREST DR		<b>Transaction ID: 22654734</b>	
City OAK HARBOR	State WA	Zip Code 98277-8639	Amount of Each Receipt this Period 90.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) <b>C. MURRAY DANFORTH</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7	
Mailing Address 17 LLOYD LN		<b>Transaction ID: 22654736</b>	
City PROVIDENCE	State RI	Zip Code 02906-1406	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation PRIVATE INVESTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	790.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	21927.00

**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 41 / 53
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Deutsche Banc Alex Brown</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 200 West Second Street, suite 500		<b>Transaction ID: 22655593</b>
City State Zip Code Winston-Salem NC 27101	Amount of Each Receipt this Period 0.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 18055.31	INTEREST

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address PATRICK STREET		<b>Transaction ID: 22655739</b>
City State Zip Code FREDERICK MD 21701	Amount of Each Receipt this Period 554.05	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 13319.50	INTEREST

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	554.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	554.27

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ADAMS HUSSEY &amp; ASSOCIATES</b>		<b>Transaction ID: 22297864</b> Date of Disbursement
Mailing Address 1600 WILSON BOULEVARD SUTE 300		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement Void - ADAMS HUSSEY & ASSOCIATES		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="001"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Void - ADAMS HUSSEY & ASSOCIATES	

Full Name (Last, First, Middle Initial) <b>B. ADAMS HUSSEY &amp; ASSOCIATES</b>		<b>Transaction ID: 22521347</b> Date of Disbursement
Mailing Address 1600 WILSON BOULEVARD SUTE 300		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement FUNDRAISING FOR PAC - DESIGN OF DIRECT M		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="004"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	FUNDRAISING FOR PAC - DESIGN OF DIRECT MAIL	

Full Name (Last, First, Middle Initial) <b>C. ADAMS HUSSEY &amp; ASSOCIATES</b>		<b>Transaction ID: 22655073</b> Date of Disbursement
Mailing Address 1600 WILSON BOULEVARD SUTE 300		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement FUNDRAISING FOR PAC-CREATION OF DIRECT M		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="003"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	FUNDRAISING FOR PAC-CREATION OF DIRECT MAIL	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. SOFTRAC AMERICA, INC</b>		Transaction ID: 22654885 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 500 MONOCACY BLVD.		Amount of Each Disbursement this Period 29.05
City FREDERICK State MD Zip Code 21701	Purpose of Disbursement FUNDRAISING FOR PAC-MAILING OF DIRECT MA Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING FOR PAC-MAILING OF DIRECT MAIL

Full Name (Last, First, Middle Initial) <b>B. U. S. POSTMASTER</b>		Transaction ID: 22654870 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address EAST PATRICK STREET		Amount of Each Disbursement this Period 928.39
City FREDERICK State MD Zip Code 21701	Purpose of Disbursement FUNDRAISING FOR PAC-POSTAGE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING FOR PAC-POSTAGE

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Transaction ID: 22654845 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address PATRICK STREET		Amount of Each Disbursement this Period 875.64
City FREDERICK State MD Zip Code 21701	Purpose of Disbursement FUNDRAISING FOR PAC-BANK SERVICE FEES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING FOR PAC-BANK SERVICE FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1833.08
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

PAGE 44 / 53

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

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NAME OF COMMITTEE (In Full)

Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A. AIRCRAFT OWNERS & PILOTS ASSOCIATION**

Mailing Address 421 AVIATION WAY

City FREDERICK State MD Zip Code 21701

Purpose of Disbursement FUNDRAISING FOR PAC-ACCOUNTING/I&T/MEMBE

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 22654801

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

11533.63

FUNDRAISING FOR PAC-ACCOUNTING/I&T/MEMBER SERVICES

Full Name (Last, First, Middle Initial)

**B. DPM UNLIMITED, INC.**

Mailing Address 3309-11 HUBBARD ROAD

City LANDOVER State MD Zip Code 20785

Purpose of Disbursement FUNDRAISING FOR PAC - MAILING OF DIRECT

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 22521346

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

316.31

FUNDRAISING FOR PAC - MAILING OF DIRECT MAIL

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

11849.94

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

16683.02

# 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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Lynn Westmoreland For Congress</b>		<b>Transaction ID: 22113836</b> Date of Disbursement 11 / 05 / 2007
Mailing Address PO Box 458		Amount of Each Disbursement this Period -1000.00
City Shargsburg State GA Zip Code 30277	011 Category/ Type	
Purpose of Disbursement Void - Lynn Westmoreland For Congress		
Candidate Name Rep. Lynn Westmoreland		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Void - Lynn Westmoreland For Congress

Full Name (Last, First, Middle Initial) <b>B. Team Emerson For Jo Ann Emerson</b>		<b>Transaction ID: 22251853</b> Date of Disbursement 11 / 14 / 2007
Mailing Address P.O. Box 822 P.O. Box 822		Amount of Each Disbursement this Period 1000.00
City Cape Girardeau State MO Zip Code 63702	011 Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name Rep. Jo Ann Emerson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>C. Lipinski For Congress Committee</b>		<b>Transaction ID: 22251865</b> Date of Disbursement 11 / 14 / 2007
Mailing Address 5858 South Archer Ave.		Amount of Each Disbursement this Period 1000.00
City Chicago State IL Zip Code 60638	011 Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name Rep. William O. Lipinski		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 3	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONTRIBUTION

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 53

<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Pascrell For Congress Inc.</b>		Transaction ID: 22251829 Date of Disbursement 11 / 14 / 2007	
Mailing Address 38 Ivy Street, SE		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement CONTRIBUTION Category/Type 011	CONTRIBUTION	
Candidate Name Rep. Bill Pascrell, Jr.	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. PASTOR FOR ARIZONA</b>		Transaction ID: 22251870 Date of Disbursement 11 / 14 / 2007	
Mailing Address PO Box 1978		Amount of Each Disbursement this Period 1000.00	
City Phoenix State AZ Zip Code 85001-1978	Purpose of Disbursement CONTRIBUTION Category/Type 011	CONTRIBUTION	
Candidate Name Congressman Pastor	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 2	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Citizens For Tom Petri</b>		Transaction ID: 22251871 Date of Disbursement 11 / 14 / 2007	
Mailing Address P.O. Box 270		Amount of Each Disbursement this Period 1000.00	
City Fond Du Lac State WI Zip Code 54936	Purpose of Disbursement CONTRIBUTION Category/Type 011	CONTRIBUTION	
Candidate Name Rep. Thomas E. Petri	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 6	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Friends Of Dick Durbin Committee</b>		<b>Transaction ID: 22251843</b> Date of Disbursement 11 / 14 / 2007	
Mailing Address PO Box 1949		Amount of Each Disbursement this Period 1500.00  CONTRIBUTION	
City Springfield	State IL		Zip Code 62705
Purpose of Disbursement CONTRIBUTION			011 Category/ Type
Candidate Name Sen. Richard J. Durbin			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 1			

Full Name (Last, First, Middle Initial) <b>B. Marion Berry For Congress</b>		<b>Transaction ID: 22251866</b> Date of Disbursement 11 / 14 / 2007	
Mailing Address 236 Massachusetts Ave., NE Ste 508		Amount of Each Disbursement this Period 1500.00  CONTRIBUTION	
City Washington	State DC		Zip Code 20002
Purpose of Disbursement CONTRIBUTION			011 Category/ Type
Candidate Name Rep. Robert Berry			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AR District: 1			

Full Name (Last, First, Middle Initial) <b>C. Capuano For Congress Committee</b>		<b>Transaction ID: 22251830</b> Date of Disbursement 11 / 14 / 2007	
Mailing Address PO Box 440305		Amount of Each Disbursement this Period 1000.00  CONTRIBUTION	
City Somerville	State MA		Zip Code 02144
Purpose of Disbursement CONTRIBUTION			011 Category/ Type
Candidate Name Rep. Michael Capuano			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MA District: 8			

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 53

<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Restore America PAC</b>		Transaction ID: 22251817 Date of Disbursement 11 / 14 / 2007
Mailing Address 2100 M Street, NW # 170-286		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20037	011 Category/Type	
Purpose of Disbursement CONTRIBUTION Candidate Name		CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Boyd For Congress</b>		Transaction ID: 22251814 Date of Disbursement 11 / 14 / 2007
Mailing Address 236 Massachusetts Ave NW Ste 508		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/Type	
Purpose of Disbursement CONTRIBUTION Candidate Name Rep. Allen Boyd		CONTRIBUTION
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mike Ross For Congress Committee</b>		Transaction ID: 22251868 Date of Disbursement 11 / 14 / 2007
Mailing Address PO Box 360		Amount of Each Disbursement this Period 1000.00
City Prescott State AR Zip Code 71857	011 Category/Type	
Purpose of Disbursement CONTRIBUTION Candidate Name Rep. Michael Ross		CONTRIBUTION
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 4	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 53

<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Michaud For Congress</b>		<b>Transaction ID: 22251867</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 499 South Capitol St SW Suite 404		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	011 Category/ Type  CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION		
Candidate Name Rep. Michael Michaud		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Freedom Fund</b>		<b>Transaction ID: 22251841</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address 128 North Columbus St.		Amount of Each Disbursement this Period 2500.00
City Alexandria State VA Zip Code 22314	011 Category/ Type  CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Richard E Neal For Congress Committee</b>		<b>Transaction ID: 22251869</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address P.O. Box 15906		Amount of Each Disbursement this Period 5000.00
City Chevy Chase State MD Zip Code 20825	011 Category/ Type  CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION		
Candidate Name Rep. Richard Neal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 2	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Aircraft Owners and Pilots Association Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Richard E Neal For Congress Committee</b>		Transaction ID: 22251872 Date of Disbursement																					
Mailing Address P.O. Box 15906		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	4	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	4	/	2	0	0	7														
City Chevy Chase	State MD	Zip Code 20825	Amount of Each Disbursement this Period <b>4000.00</b>																				
Purpose of Disbursement CONTRIBUTION		<table border="1"> <tr> <td>011</td> </tr> </table>		011																			
011																							
Candidate Name Rep. Richard Neal		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MA District: 2	CONTRIBUTION																						

Full Name (Last, First, Middle Initial) <b>B. Demint For Senate Committee Inc</b>		Transaction ID: 22251797 Date of Disbursement																					
Mailing Address 682 4th St, NE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	4	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	4	/	2	0	0	7														
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period <b>-2000.00</b>																				
Purpose of Disbursement Void - Demint For Senate Committee Inc		<table border="1"> <tr> <td>011</td> </tr> </table>		011																			
011																							
Candidate Name Sen. James DeMint		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: SC District: 2	Void - Demint For Senate Committee Inc																						

Full Name (Last, First, Middle Initial) <b>C. Demint For Senate Committee Inc</b>		Transaction ID: 22251842 Date of Disbursement																					
Mailing Address 682 4th St, NE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	4	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	4	/	2	0	0	7														
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period <b>2500.00</b>																				
Purpose of Disbursement CONTRIBUTION		<table border="1"> <tr> <td>011</td> </tr> </table>		011																			
011																							
Candidate Name Sen. James DeMint		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: SC District: 2	CONTRIBUTION																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Aircraft Owners and Pilots Association Political Action Committee

<b>A. Latta For Congress Committee</b> Full Name (Last, First, Middle Initial) Mailing Address 300 North Main Street City Bowling Green State OH Zip Code 43402 Purpose of Disbursement CONTRIBUTION Candidate Name Mr. Robert Latta Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 5 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Special General		<b>Transaction ID: 22251873</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 5000.00 CONTRIBUTION
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>B. DAKPAC</b> Full Name (Last, First, Middle Initial) Mailing Address 120 Maryland Avenue, NE City Washington State DC Zip Code 20002 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 22251854</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 2500.00 CONTRIBUTION
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>C. DAKPAC</b> Full Name (Last, First, Middle Initial) Mailing Address 120 Maryland Avenue, NE City Washington State DC Zip Code 20002 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 22251874</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 2500.00 CONTRIBUTION
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 53

<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)

Aircraft Owners and Pilots Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Latta For Congress Committee

Mailing Address 300 North Main Street

City Bowling Green State OH Zip Code 43402

Purpose of Disbursement  
CONTRIBUTION Funds Reported On <Enter Re

Candidate Name  
Mr. Robert Latta

Office Sought:  House  
 Senate  
 President

State: OH District: 5

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼  
2006 Special General

011  
Category/  
Type

Transaction ID: 22675230

Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

5000.00

**[MEMO ITEM]**

CONTRIBUTION Funds Report-  
ed On <Enter Report Name  
Here>

**B.** Full Name (Last, First, Middle Initial)  
Latta For Congress Committee

Mailing Address 300 North Main Street

City Bowling Green State OH Zip Code 43402

Purpose of Disbursement  
CONTRIBUTION Re-designated funds for tra

Candidate Name  
Mr. Robert Latta

Office Sought:  House  
 Senate  
 President

State: OH District: 5

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼  
Special-General

011  
Category/  
Type

Transaction ID: 22675231

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

5000.00

**[MEMO ITEM]**

CONTRIBUTION Re-designated  
funds for trans. dated 11-  
/14/2007

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

0.00

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

35000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 53 / 53	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Aircraft Owners and Pilots Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S POSTMASTER	Nature of Debt (Purpose): FUNDRAISING FOR PAC-POSTAGE FOR DIRECT M
Mailing Address EAST STREET	
City State ZIP Code FREDERICK MD 21701	

Outstanding Balance Beginning This Period	<b>Transaction ID: 22679442</b>	
928.39		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
648.46	928.39	648.46

1) <b>SUBTOTALS</b> This Period This Page (optional).....	648.46
2) <b>TOTALS</b> This Period (last page this line number only).....	648.46
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	