

**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  
 PMA Group Political Action Committee

ADDRESS (number and street) **Check if different than previously reported. (ACC)**  
 1755 Jefferson Davis Highway  
 Suite 1107  
 Arlington VA 22202

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00280321 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	<input checked="" type="checkbox"/>	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Special (12S)	Runoff (12R)
October 15 Quarterly Report(Q3)		Convention (12C)			
January 31 Quarterly Report(YE)	Election on				in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election on				in the State of

5. Covering Period 02 01 2001 through 02 28 2001

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 Mr. Joseph S. Littleton, III

Signature of Treasurer \_\_\_\_\_ Date 03 16 2001

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 (Revised 1/2001)

Page 2

Write or Type Committee Name  
FMA Group Political Action Committee

Report Covering the Period: From: <sup>h</sup>0<sup>2</sup> <sup>D</sup>0<sup>1</sup> <sup>v</sup>200<sup>1</sup> To: <sup>h</sup>0<sup>2</sup> <sup>D</sup>2<sup>8</sup> <sup>v</sup>200<sup>1</sup>

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>v</sup> 200 <sup>1</sup>		13467.28
(b) Cash on Hand at Beginning of Reporting Period .....	32767.28	
(c) Total Receipts (from Line 19) .....	26466.32	45766.32
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	59233.60	59233.60
7. Total Disbursements (from Line 30) .....	21500.00	21500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	37733.60	37733.60
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) .....	0.00	

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

**For further information contact:**

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

Toll Free 800-426-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

PMA Group Political Action Committee

Report Covering the Period: From: <sup>W</sup>02 <sup>D</sup>01 <sup>Y</sup>2001 To: <sup>W</sup>02 <sup>D</sup>28 <sup>Y</sup>2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	26466.32	
(ii) Unitemized .....	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26466.32	45766.32
(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 32, page 4) .....	26466.32	45766.32
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 36, page 4) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	26466.32	45766.32
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	26466.32	45766.32

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	21500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	21500.00	21500.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	21500.00	21500.00
<hr/>		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	26466.32	45766.32
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	26466.32	45766.32
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	0.00	0.00

**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 5 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)  
PMA Group Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Lou Brown

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 20 / 2001

Mailing Address  
4801 Maury Lane

City State Zip Code  
Alexandria VA 22304

Amount of Each Receipt this Period  
5000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Precision Auto Care CEO

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

Transaction ID: SA11A1.5459

**B.** Full Name (Last, First, Middle Initial)  
Dan Cunningham

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 21 / 2001

Mailing Address  
3442 Mt. Burnside Way

City State Zip Code  
Woodbridge VA 22192

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date  
Primary General  
Other (specify) ▼ 500.00

Transaction ID: SA11A1.5463

**C.** Full Name (Last, First, Middle Initial)  
Daniel Fleming

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Mailing Address  
6488 Crayford Street

City State Zip Code  
Burke VA 22015-4178

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date  
Primary General  
Other (specify) ▼ 500.00

Transaction ID: SA11A1.5452

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **6000.00**

**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 6 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)  
**A. Kaylene Green**

Mailing Address  
PO Box 419  
City State Zip Code  
Oakton VA 22124

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 27 / 2001

Amount of Each Receipt this Period  
5000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

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

Transaction ID: SA11A1.5484

Full Name (Last, First, Middle Initial)  
**B. David Gwalby**

Mailing Address  
502 Woodland Terrace  
City State Zip Code  
Alexandria VA 22302

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.5441

Full Name (Last, First, Middle Initial)  
**C. Wendy Harrison**

Mailing Address  
4801 Maury Lane  
City State Zip Code  
Alexandria VA 22304

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 20 / 2001

Amount of Each Receipt this Period  
5000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None

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

Transaction ID: SA11A1.5481

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **11000.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Joseph S. Littleton, III

Mailing Address  
10220 Grovewood Way

City State Zip Code  
Fairfax VA 22032

Date of Receipt  
N M / D E / Y Y Y Y  
02 / 07 / 2001

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period  
500.00

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.5442

**B.** Full Name (Last, First, Middle Initial)  
John Lynch

Mailing Address  
18719 Ostanbury Ct.

City State Zip Code  
Dumfries VA 22026

Date of Receipt  
N M / D E / Y Y Y Y  
02 / 07 / 2001

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period  
416.66

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 416.66

Transaction ID: SA11A1.5437

**C.** Full Name (Last, First, Middle Initial)  
Steve Masey

Mailing Address  
10522 Providence Way

City State Zip Code  
Fairfax VA 22030

Date of Receipt  
N M / D E / Y Y Y Y  
02 / 07 / 2001

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period  
1250.00

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 1250.00

Transaction ID: SA11A1.5445

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2166.66**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mark J. Magliocchetti

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 15 / 2001

Mailing Address  
5115 Donovan Drive

City State Zip Code  
Alexandria VA 22304

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Fibergate, Inc. Sales/Marketing

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 1500.00

Transaction ID: SA11A1.5455

**B.** Full Name (Last, First, Middle Initial)  
Brian Morgan

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Mailing Address  
8811 Mallard View

City State Zip Code  
Fairfax Station VA 22039

Amount of Each Receipt this Period  
466.66

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 466.66

Transaction ID: SA11A1.5448

**C.** Full Name (Last, First, Middle Initial)  
Mark Rokels

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Mailing Address  
3429 South Stafford Street, B-2

City State Zip Code  
Arlington VA 22206

Amount of Each Receipt this Period  
833.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 833.00

Transaction ID: SA11A1.5450

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1799.66**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)  
**A. Tim Sanders**

Mailing Address  
4534 Cornwell Drive

City State Zip Code  
Annandale VA 22003

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.5451

Full Name (Last, First, Middle Initial)  
**B. Briggs Shada**

Mailing Address  
8920 Colesbury Place

City State Zip Code  
Fairfax VA 22031

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 500.00

Transaction ID: SA11A1.5443

Full Name (Last, First, Middle Initial)  
**C. Kelli Short**

Mailing Address  
2400 Glebe Road Apt # 506

City State Zip Code  
Arlington VA 22206

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2001

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date ▼  
Primary General  
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.5448

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2500.00**

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

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

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

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Brian Thiel

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 21 / 2001

Mailing Address  
12505 Lally Post Lane

City State Zip Code  
Woodbridge VA 22192

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period  
500.00

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date  
Primary General  
Other (specify) ▼ 500.00

Transaction ID: SA11A1.5462

**B.** Full Name (Last, First, Middle Initial)  
Tom Velti

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 13 / 2001

Mailing Address  
501 Slaters Lane

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period  
1000.00

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date  
Primary General  
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.5453

**C.** Full Name (Last, First, Middle Initial)  
Mark Wackelst

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 13 / 2001

Mailing Address  
409 Colin Lane NW

City State Zip Code  
Vienna VA 22180

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period  
500.00

Name of Employer Occupation  
The PMA Group, Inc. Associate

Receipt For: Election Year-to-Date  
Primary General  
Other (specify) ▼ 500.00

Transaction ID: SA11A1.5454

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

**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 11 / 20	
	<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)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Alfred J. Woodbridge

Mailing Address  
6211 Springstone Place

City State Zip Code  
Clifton VA 20124

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 01 / 2001

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period  
1000.00

Name of Employer The PMA Group, Inc.	Occupation Associate
---	-------------------------

Receipt For: Election Year-to-Date ▼

Primary General Other (specify) ▼

1000.00

Transaction ID: SA11A1.5436

B.

C.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>26466.32</b>

**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 12 / 20

<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				

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ALASKANS FOR DON YOUNG</b>		Date of Disbursement 02 / 26 / 2001
Mailing Address P O BOX 100298 City ANCHORAGE State AK Zip Code 99510		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.5500
State: AK District: 00		

Full Name (Last, First, Middle Initial) <b>B. BOB SMITH FOR U S SENATE</b>		Date of Disbursement 02 / 08 / 2001
Mailing Address PO BOX 387 City EXETER State NH Zip Code 03833		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.5469
State: NH District: 00		

Full Name (Last, First, Middle Initial) <b>C. CHAMBLISS FOR CONGRESS</b>		Date of Disbursement 02 / 26 / 2001
Mailing Address P.O. BOX 4084 City MACON State GA Zip Code 31208		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.5503
State: GA District: 08		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</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)

PAGE 13 / 20

<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				

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR ARLEN SPECTER</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address 226 NORTH ALFRED STREET SOUTH 15TH STREET City State Zip Code ALEXANDRIA VA 22314		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.5490	
Candidate Name		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: PA      District: 00			

Full Name (Last, First, Middle Initial) <b>B. COBLE FOR CONGRESS</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address 338 N ELM ST SUITE 200 BOX 1177 City State Zip Code GREENSBORO NC 27402		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.5492	
Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: NC      District: 06			

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF CONGRESSMAN TIM HOLDEN</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address P.O. BOX 37 City State Zip Code ST. CLAIR PA 17970		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement		Transaction ID: SB23.5513	
Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: PA      District: 08			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>2500.00</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)

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

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NAME OF COMMITTEE (In Full)  
FMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DON SHERWOOD</b>		Date of Disbursement 02 / 06 / 2001
Mailing Address 81 WARREN STREET City TUNKHANNOCK State PA Zip Code 18657		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.5482
State: PA District: 10		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF MARY LANDRIEU INC</b>		Date of Disbursement 02 / 27 / 2001
Mailing Address 203 CARONDELET STREET SUITE 630 City NEW ORLEANS State LA Zip Code 70130		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.5517
State: LA District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF PATRICK J KENNEDY INC</b>		Date of Disbursement 02 / 27 / 2001
Mailing Address PO BOX 321 City PAWTUCKET State RI Zip Code 02862		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.5519
State: RI District: 01		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. GRUCCI FOR CONGRESS</b>		Date of Disbursement 02 / 27 / 2001	
Mailing Address 373 ROUTE 111 City SMITHTOWN		Amount of Each Disbursement this Period 500.00	
State: NY      Zip Code District: 01      11787		Purpose of Disbursement	
Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: NY      District: 01		Transaction ID: SB23.5523	

Full Name (Last, First, Middle Initial) <b>B. HOBSON FOR CONGRESS COMMITTEE</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address 2525 N LIMESTONE City SPRINGFIELD		Amount of Each Disbursement this Period 1000.00	
State: OH      Zip Code District: 07      45603		Purpose of Disbursement	
Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: OH      District: 07		Transaction ID: SB23.5510	

Full Name (Last, First, Middle Initial) <b>C. HOYER FOR CONGRESS</b>		Date of Disbursement 02 / 08 / 2001	
Mailing Address 7905 MALCOLM ROAD SUITE 102 City CLINTON		Amount of Each Disbursement this Period 1000.00	
State: MD      Zip Code District: 05      20735		Purpose of Disbursement	
Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: MD      District: 05		Transaction ID: SB23.5466	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ISSA FOR CONGRESS</b>		Date of Disbursement 02 / 26 / 2001
Mailing Address POST OFFICE BOX 760 City: VISTA State: CA Zip Code: 92085		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement	Candidate Name	Transaction ID: SB23.5515
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: CA District: 46	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. JO ANN DAVIS FOR CONGRESS</b>		Date of Disbursement 02 / 08 / 2001
Mailing Address POST OFFICE BOX 1834 City: YORKTOWN State: VA Zip Code: 23692		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement 2000 General Debt Retirement	Candidate Name	Transaction ID: SB23.5471
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: VA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. LATHAM FOR CONGRESS</b>		Date of Disbursement 02 / 26 / 2001
Mailing Address PO BOX 174 City: SIOUX CITY State: IA Zip Code: 51102		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Transaction ID: SB23.5511
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
State: IA District: 05	Category/Type	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. MCCONNELL SENATE COMMITTEE 02</b>		Date of Disbursement 02 / 27 / 2001	
Mailing Address PO BOX 1496 City: LOUISVILLE State: KY Zip Code: 40201		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2000 General Debt Retirement		Category/ Type	
Candidate Name			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.5521	
State: KY District: 00			

Full Name (Last, First, Middle Initial) <b>B. NADLER FOR CONGRESS INC</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address 379 WEST BROADWAY SUITE 305 City: NEW YORK State: NY Zip Code: 10012		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	Transaction ID: SB23.5486	
State: NY District: 08			

Full Name (Last, First, Middle Initial) <b>C. NELSON FOR US SENATE</b>		Date of Disbursement 02 / 14 / 2001	
Mailing Address PO BOX 540154 SUITE B City: OMAHA State: NE Zip Code: 68154		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Debt Retirement		Category/ Type	
Candidate Name			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.5484	
State: NE District: 00			

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

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

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. PAT ROBERTS FOR SENATE</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address BOX 433 City GREAT BEND State KS Zip Code 67530		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.5497	
Candidate Name		Category/ Type	
Office Sought:	House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary    General Other (specify) ▼	
State: KS    District: 00			

Full Name (Last, First, Middle Initial) <b>B. REED COMMITTEE</b>		Date of Disbursement 02 / 08 / 2001	
Mailing Address PO BOX 8828 City CRANSTON State RI Zip Code 02920		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement		Transaction ID: SB23.5467	
Candidate Name		Category/ Type	
Office Sought:	House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary    General Other (specify) ▼	
State: RI    District: 00			

Full Name (Last, First, Middle Initial) <b>C. TEAM SUNUNU</b>		Date of Disbursement 02 / 08 / 2001	
Mailing Address PO BOX 500 City RYE State NH Zip Code 03870		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement		Transaction ID: SB23.5474	
Candidate Name		Category/ Type	
Office Sought:	<input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary    General Other (specify) ▼	
State: NH    District: 01			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. TERRY EVERETT FOR CONGRESS</b>		Date of Disbursement 02 / 27 / 2001	
Mailing Address PO BOX 230189 City: MONTGOMERY State: AL Zip Code: 36123		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Candidate Name		Transaction ID: SB23.5526	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: AL      District: 02	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. TIM JOHNSON FOR SOUTH DAKOTA INC</b>		Date of Disbursement 02 / 08 / 2001	
Mailing Address PO BOX 1859 City: SIOUX FALLS State: SD Zip Code: 57101		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name		Transaction ID: SB23.5480	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: SD      District: 00	Category/Type		

Full Name (Last, First, Middle Initial) <b>C. WALSH FOR CONGRESS COMMITTEE</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address 306 WINKWORTH PARKWAY City: SYRACUSE State: NY Zip Code: 13215		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Candidate Name		Transaction ID: SB23.5505	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: NY      District: 26	Category/Type		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

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NAME OF COMMITTEE (In Full)  
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. WALTER JONES FOR CONGRESS COMMITTEE</b>		Date of Disbursement 02 / 06 / 2001	
Mailing Address 8384 SIX FORKS RD STE 203 City: RALEIGH State: NC Zip Code: 27615		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Candidate Name		Transaction ID: SB23.547B	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
Category/Type			

Full Name (Last, First, Middle Initial) <b>B. WAYNE ALLARD FOR UNITED STATES SENATE COMMITTEE</b>		Date of Disbursement 02 / 26 / 2001	
Mailing Address PO BOX 32 City: LOVELAND State: CO Zip Code: 80538		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name		Transaction ID: SB23.550B	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
Category/Type			

**C.**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>21500.00</b>