

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
FRED THOMPSON POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		202472.36
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	44888.58									
(c) Total Receipts (from Line 19)	60725.48	113413.96								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	105614.06	315886.32								
7. Total Disbursements (from Line 31)	50880.98	261153.24								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54733.08	54733.08								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
FRED THOMPSON POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	0	9

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)	3271.00	6379.89
(ii) Unitemized	6232.50	20243.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9503.50	26623.39
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9503.50	31623.39
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)	13375.00	15384.80
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	37846.98	66405.77
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))	60725.48	113413.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	60725.48	113413.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	45810.98	243028.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	45810.98	243028.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5070.00	13070.00
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	55.00
(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	55.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	50880.98	261153.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50880.98	261153.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	9503.50	31623.39
34. Total Contribution Refunds (from Line 28(d))	0.00	55.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9503.50	31568.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	45810.98	243028.24
37. Offsets to Operating Expenditures (from Line 15, page 3)	13375.00	15384.80
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32435.98	227643.44

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
 FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AUSTIN WALNE			Nature of Debt (Purpose): UNCASHED CHECK VOIDED. CHECK WILL BE R
Mailing Address 1760 OLD MEADOW ROAD			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 46.00		Transaction ID: SD.011	
Amount Incurred This Period 0.00	Payment This Period 46.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GLOBAL CROSSING CONFERENCING			Nature of Debt (Purpose): TELEPHONE SERVICE; DISPU- TED AMOUNT RESO
Mailing Address P.O. BOX 790407			
City ST. LOUIS	State MO	ZIP Code 63179	

Outstanding Balance Beginning This Period 23687.58		Transaction ID: SD.004	
Amount Incurred This Period 0.00	Payment This Period 23687.58	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 54
(check only one)

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

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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) KAREN ANTHONY</p> <p>Mailing Address 13 CIVIC PLACE</p> <hr/> <p>City State Zip Code DAYTON OH 45420-2911</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SHUMSKY ENTERPRISES SALES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt 07 / 10 / 2009</p> <p>Transaction ID: SA11.251338</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) KAREN ANTHONY</p> <p>Mailing Address 13 CIVIC PLACE</p> <hr/> <p>City State Zip Code DAYTON OH 45420-2911</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SHUMSKY ENTERPRISES SALES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt 08 / 10 / 2009</p> <p>Transaction ID: SA11.251395</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) KAREN ANTHONY</p> <p>Mailing Address 13 CIVIC PLACE</p> <hr/> <p>City State Zip Code DAYTON OH 45420-2911</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SHUMSKY ENTERPRISES SALES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt 09 / 10 / 2009</p> <p>Transaction ID: SA11.251416</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 54
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) KAREN ANTHONY	Date of Receipt
	Mailing Address 13 CIVIC PLACE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 0 / 2 0 0 9
	City State Zip Code DAYTON OH 45420-2911	Transaction ID: SA11.251439
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer Occupation SHUMSKY ENTERPRISES SALES	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 275.00	

B.	Full Name (Last, First, Middle Initial) KAREN ANTHONY	Date of Receipt
	Mailing Address 13 CIVIC PLACE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 0 / 2 0 0 9
	City State Zip Code DAYTON OH 45420-2911	Transaction ID: SA11.251532
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer Occupation SHUMSKY ENTERPRISES SALES	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 275.00	

C.	Full Name (Last, First, Middle Initial) DAN BROOME	Date of Receipt
	Mailing Address PSC 451 BOX 310	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 7 / 2 0 0 9
	City State Zip Code FPO AE 09834-2800	Transaction ID: SA11.251470
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 100.00
	Name of Employer Occupation LOCKHEED MARTIN FIELD SERVICE ENGINEER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 225.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MARY BRYAN

Mailing Address 6400 MALVEY AVENUE

City State Zip Code
FORT WORTH TX 76116-4423

FEC ID number of contributing federal political committee. C

Name of Employer
HARRIS METHODIST FORT WORTH HOSPITAL

Occupation
ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
07 / 10 / 2009

Transaction ID: SA11.251337

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MARY BRYAN

Mailing Address 6400 MALVEY AVENUE

City State Zip Code
FORT WORTH TX 76116-4423

FEC ID number of contributing federal political committee. C

Name of Employer
HARRIS METHODIST FORT WORTH HOSPITAL

Occupation
ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
08 / 10 / 2009

Transaction ID: SA11.251399

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MARY BRYAN

Mailing Address 6400 MALVEY AVENUE

City State Zip Code
FORT WORTH TX 76116-4423

FEC ID number of contributing federal political committee. C

Name of Employer
HARRIS METHODIST FORT WORTH HOSPITAL

Occupation
ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
09 / 10 / 2009

Transaction ID: SA11.251417

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 75.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 54
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARY BRYAN	Date of Receipt MM / DD / YYYY 10 / 10 / 2009
	Mailing Address 6400 MALVEY AVENUE	Transaction ID: SA11.251433
	City State Zip Code FORT WORTH TX 76116-4423	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HARRIS METHODIST FORT WORTH HOSPITAL ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) MARY BRYAN	Date of Receipt MM / DD / YYYY 11 / 10 / 2009
	Mailing Address 6400 MALVEY AVENUE	Transaction ID: SA11.251529
	City State Zip Code FORT WORTH TX 76116-4423	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HARRIS METHODIST FORT WORTH HOSPITAL ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MR. HARRY CROWELL	Date of Receipt MM / DD / YYYY 08 / 05 / 2009
	Mailing Address 8331 BERRY AVE	Transaction ID: SA11.251365
	City State Zip Code JACKSONVILLE FL 32211-9606	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation NONE NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 54
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) KATHERINE DOGGETT	Date of Receipt MM / DD / YYYY 07 / 10 / 2009
	Mailing Address 2417B POTOMAC	Transaction ID: SA11.251335
	City HOUSTON State TX Zip Code 77057-4555	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: INTEGRA REALTY RESOURCES-HOUSTON Occupation: COMMERCIAL REAL ESTATE APPRAISER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) KATHERINE DOGGETT	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 2417B POTOMAC	Transaction ID: SA11.251392
	City HOUSTON State TX Zip Code 77057-4555	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: INTEGRA REALTY RESOURCES-HOUSTON Occupation: COMMERCIAL REAL ESTATE APPRAISER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) KATHERINE DOGGETT	Date of Receipt MM / DD / YYYY 09 / 10 / 2009
	Mailing Address 2417B POTOMAC	Transaction ID: SA11.251426
	City HOUSTON State TX Zip Code 77057-4555	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer: INTEGRA REALTY RESOURCES-HOUSTON Occupation: COMMERCIAL REAL ESTATE APPRAISER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 54
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) KATHERINE DOGGETT	Date of Receipt
	Mailing Address 2417B POTOMAC	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 10 / 2009
	City State Zip Code HOUSTON TX 77057-4555	Transaction ID: SA11.251436
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer INTEGRA REALTY RESOURCES-HOUSTON	Occupation COMMERCIAL REAL ESTATE APPRAISER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) KATHERINE DOGGETT	Date of Receipt
	Mailing Address 2417B POTOMAC	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 10 / 2009
	City State Zip Code HOUSTON TX 77057-4555	Transaction ID: SA11.251533
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer INTEGRA REALTY RESOURCES-HOUSTON	Occupation COMMERCIAL REAL ESTATE APPRAISER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MR. MIKE FRISBIE	Date of Receipt
	Mailing Address 7793 EAST HIGHWAY #4	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 05 / 2009
	City State Zip Code GYPSUM KS 67448	Transaction ID: SA11.251378
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer FRISBIE CONSTRUCTION COMP-ANY INCORPORA	Occupation CONSTRUCTION	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 13 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY S. GOULD

Mailing Address 4859 LANTANA AVENUE

City State Zip Code
LIVERMORE CA 94551-1421

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
07 / 10 / 2009

Transaction ID: SA11.251341

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY S. GOULD

Mailing Address 4859 LANTANA AVENUE

City State Zip Code
LIVERMORE CA 94551-1421

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
08 / 10 / 2009

Transaction ID: SA11.251397

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY S. GOULD

Mailing Address 4859 LANTANA AVENUE

City State Zip Code
LIVERMORE CA 94551-1421

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
09 / 10 / 2009

Transaction ID: SA11.251420

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GARY S. GOULD

Mailing Address 4859 LANTANA AVENUE

City State Zip Code
LIVERMORE CA 94551-1421

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
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 9

Transaction ID: SA11.251434

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY S. GOULD

Mailing Address 4859 LANTANA AVENUE

City State Zip Code
LIVERMORE CA 94551-1421

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
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11.251530

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD GRIFFITH

Mailing Address 3417 MILAM STREET

City State Zip Code
HOUSTON TX 77002-9531

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

Name of Employer Occupation
RICHARD S. GRIFFITH INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 8 / 2 0 0 9

Transaction ID: SA11.251326

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 150.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. RICHARD GRIFFITH

Mailing Address 3417 MILAM STREET

City State Zip Code
HOUSTON TX 77002-9531

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

Name of Employer Occupation
RICHARD S. GRIFFITH INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2009

Transaction ID: SA11.251411

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD GRIFFITH

Mailing Address 3417 MILAM STREET

City State Zip Code
HOUSTON TX 77002-9531

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

Name of Employer Occupation
RICHARD S. GRIFFITH INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2009

Transaction ID: SA11.251464

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN LEBRELL

Mailing Address 5533 WINDFORD DR.

City State Zip Code
ST. LOUIS MO 63129-3528

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

Name of Employer Occupation
ANHEUSER-BUSCH RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
08 / 06 / 2009

Transaction ID: SA11.251386

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 450.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN LEBRELL

Mailing Address 5533 WINDFORD DR.

City State Zip Code
ST. LOUIS MO 63129-3528

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

Name of Employer ANHEUSER-BUSCH Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2009

Transaction ID: SA11.251457

Amount of Each Receipt this Period
200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. MATHEW MONTELONGO

Mailing Address 5876 WILSHIRE DRIVE

City State Zip Code
FONTANA CA 92336-5696

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
07 / 04 / 2009

Transaction ID: SA11.251355A

Amount of Each Receipt this Period
500.00

CONTRIBUTION

CHARGED BACK \$500.00 ON 07/27/2009

C.

Full Name (Last, First, Middle Initial)
MR. MATHEW MONTELONGO

Mailing Address 5876 WILSHIRE DRIVE

City State Zip Code
FONTANA CA 92336-5696

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2009

Transaction ID: SA11.251355B

Amount of Each Receipt this Period
-500.00

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional) ▶ **200.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 54
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. DONNA MUHLHAUSEN

Mailing Address 313 E. WAYSIDE

City State Zip Code
WHARTON TX 77488-2558

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

Name of Employer Occupation
VGT SOD L.P. OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2009

Transaction ID: SA11.251336

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. DONNA MUHLHAUSEN

Mailing Address 313 E. WAYSIDE

City State Zip Code
WHARTON TX 77488-2558

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

Name of Employer Occupation
VGT SOD L.P. OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2009

Transaction ID: SA11.251403

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. DONNA MUHLHAUSEN

Mailing Address 313 E. WAYSIDE

City State Zip Code
WHARTON TX 77488-2558

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

Name of Employer Occupation
VGT SOD L.P. OFFICE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2009

Transaction ID: SA11.251415

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. DONNA MUHLHAUSEN

Mailing Address 313 E. WAYSIDE

City State Zip Code
WHARTON TX 77488-2558

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

Name of Employer Occupation
VGT SOD L.P. OFFICE MANAGER

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 9

Transaction ID: SA11.251432

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. DONNA MUHLHAUSEN

Mailing Address 313 E. WAYSIDE

City State Zip Code
WHARTON TX 77488-2558

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

Name of Employer Occupation
VGT SOD L.P. OFFICE MANAGER

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

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11.251526

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BRYAN POWELL

Mailing Address 219 RED POPPY TRAIL

City State Zip Code
GEORGETOWN TX 78633-4576

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 ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11.251331

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 54
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) BRYAN POWELL		Date of Receipt MM / DD / YYYY 08 / 10 / 2009
Mailing Address 219 RED POPPY TRAIL		Transaction ID: SA11.251401
City GEORGETOWN	State TX	Zip Code 78633-4576
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.

Full Name (Last, First, Middle Initial) BRYAN POWELL		Date of Receipt MM / DD / YYYY 09 / 10 / 2009
Mailing Address 219 RED POPPY TRAIL		Transaction ID: SA11.251418
City GEORGETOWN	State TX	Zip Code 78633-4576
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.

Full Name (Last, First, Middle Initial) BRYAN POWELL		Date of Receipt MM / DD / YYYY 10 / 10 / 2009
Mailing Address 219 RED POPPY TRAIL		Transaction ID: SA11.251435
City GEORGETOWN	State TX	Zip Code 78633-4576
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 20 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRYAN POWELL

Mailing Address 219 RED POPPY TRAIL

City State Zip Code
GEORGETOWN TX 78633-4576

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 ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2009

Transaction ID: SA11.251528

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GREG RADABAUGH

Mailing Address 9903 BRIAR PATCH

City State Zip Code
SAN ANTONIO TX 78254-6129

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

Name of Employer Occupation
DEPT. OF DEFENSE ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2009

Transaction ID: SA11.251339

Amount of Each Receipt this Period
25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GREG RADABAUGH

Mailing Address 9903 BRIAR PATCH

City State Zip Code
SAN ANTONIO TX 78254-6129

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

Name of Employer Occupation
DEPT. OF DEFENSE ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2009

Transaction ID: SA11.251396

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GREG RADABAUGH

Mailing Address 9903 BRIAR PATCH

City State Zip Code
SAN ANTONIO TX 78254-6129

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

Name of Employer DEPT. OF DEFENSE Occupation ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 09 / 10 / 2009
Transaction ID: SA11.251423
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GREG RADABAUGH

Mailing Address 9903 BRIAR PATCH

City State Zip Code
SAN ANTONIO TX 78254-6129

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

Name of Employer DEPT. OF DEFENSE Occupation ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 10 / 2009
Transaction ID: SA11.251431
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GREG RADABAUGH

Mailing Address 9903 BRIAR PATCH

City State Zip Code
SAN ANTONIO TX 78254-6129

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

Name of Employer DEPT. OF DEFENSE Occupation ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 10 / 2009
Transaction ID: SA11.251527
Amount of Each Receipt this Period: 25.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 54
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DONNA SNELLING	Date of Receipt MM / DD / YYYY 07 / 10 / 2009
	Mailing Address 102 MAPLE STREET	Transaction ID: SA11.251334
	City State Zip Code WELLSVILLE KS 66092-8106	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BAYER CROPSCIENCE HISTOLOGY TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) DONNA SNELLING	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 102 MAPLE STREET	Transaction ID: SA11.251394
	City State Zip Code WELLSVILLE KS 66092-8106	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BAYER CROPSCIENCE HISTOLOGY TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) DONNA SNELLING	Date of Receipt MM / DD / YYYY 09 / 10 / 2009
	Mailing Address 102 MAPLE STREET	Transaction ID: SA11.251425
	City State Zip Code WELLSVILLE KS 66092-8106	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BAYER CROPSCIENCE HISTOLOGY TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DONNA SNELLING

Mailing Address 102 MAPLE STREET

City State Zip Code
WELLSVILLE KS 66092-8106

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

Name of Employer Occupation
BAYER CROSCIENCE HISTOLOGY TECHNICIAN

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 9

Transaction ID: SA11.251438

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DONNA SNELLING

Mailing Address 102 MAPLE STREET

City State Zip Code
WELLSVILLE KS 66092-8106

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

Name of Employer Occupation
BAYER CROSCIENCE HISTOLOGY TECHNICIAN

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

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11.251525

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
KAY WALKER

Mailing Address 4411 NORMANDY

City State Zip Code
DALLAS TX 75205-2043

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

Name of Employer Occupation
N/A N/A

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11.251364

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
KAY WALKER

Mailing Address 4411 NORMANDY

City State Zip Code
DALLAS TX 75205-2043

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

Name of Employer N/A Occupation N/A

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 0 / 2 7 / 2 0 0 9

Transaction ID: SA11.251477

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
AUSTIN WALNE

Mailing Address 1760 OLD MEADOW ROAD

City State Zip Code
MCLEAN VA 22102

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: SA.006

Amount of Each Receipt this Period
46.00

TRAVEL COSTS

ORIGINAL CHECK UNCASHED/UNABLE TO LOCATE EMPLOYEE/-CONVERTED TO CONTRIBUTION IN KIND

C.

Full Name (Last, First, Middle Initial)
DONNA WENBERG

Mailing Address 57 NORTHAMPTON BLVD

City State Zip Code
STAFFORD VA 22554-8800

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11.251332

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 346.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DONNA WENBERG	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 57 NORTHAMPTON BLVD	Transaction ID: SA11.251402
	City State Zip Code STAFFORD VA 22554-8800	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) DONNA WENBERG	Date of Receipt MM / DD / YYYY 09 / 10 / 2009
	Mailing Address 57 NORTHAMPTON BLVD	Transaction ID: SA11.251419
	City State Zip Code STAFFORD VA 22554-8800	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) MERRILY WHALEN	Date of Receipt MM / DD / YYYY 07 / 10 / 2009
	Mailing Address 8121 BAY COLONY ST	Transaction ID: SA11.251342
	City State Zip Code LAS VEGAS NV 89131-6707	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED TAX ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 54
	<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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MERRILY WHALEN	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 8121 BAY COLONY ST	Transaction ID: SA11.251398
	City State Zip Code LAS VEGAS NV 89131-6707	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation TAX ACCOUNTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) MERRILY WHALEN	Date of Receipt MM / DD / YYYY 09 / 10 / 2009
	Mailing Address 8121 BAY COLONY ST	Transaction ID: SA11.251421
	City State Zip Code LAS VEGAS NV 89131-6707	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation TAX ACCOUNTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) MERRILY WHALEN	Date of Receipt MM / DD / YYYY 10 / 10 / 2009
	Mailing Address 8121 BAY COLONY ST	Transaction ID: SA11.251440
	City State Zip Code LAS VEGAS NV 89131-6707	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation TAX ACCOUNTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MERRILY WHALEN		Date of Receipt
	Mailing Address 8121 BAY COLONY ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 0 / 2 0 0 9
	City	State	Zip Code
	LAS VEGAS	NV	89131-6707
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.251531
Name of Employer SELF-EMPLOYED		Occupation TAX ACCOUNTANT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 275.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. DEBBIE C. WOOD		Date of Receipt
	Mailing Address 400 BLUFF RIDGE ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 0 5 / 2 0 0 9
	City	State	Zip Code
	WEATHERFORD	TX	76087-1512
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.251369
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 275.00
TOTAL This Period (last page this line number only)	<input type="text"/> 3271.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 54

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS

Mailing Address P.O. BOX 371461

City State Zip Code
PITTSBURGH PA 15250

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2009

Transaction ID: SA.001

Amount of Each Receipt this Period

24.00

REFUND OVERPAYMENT

B.

Full Name (Last, First, Middle Initial)
INTERNAL REVENUE SERVICE

Mailing Address .

City State Zip Code
OGDEN UT 84201

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 02 / 2009

Transaction ID: SA.007

Amount of Each Receipt this Period

11751.00

REFUND OF OVERPAYMENT OF BUSINESS TAXES

C.

Full Name (Last, First, Middle Initial)
UNITED STATES POSTAL SERVICE

Mailing Address 8409 LEE HIGHWAY

City State Zip Code
MERRIFIELD VA 22081

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 02 / 2009

Transaction ID: SA.008

Amount of Each Receipt this Period

1600.00

REFUND OF UNUSED POSTAGE

SUBTOTAL of Receipts This Page (optional)

13375.00

TOTAL This Period (last page this line number only)

13375.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 54
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DIAMOND LIST COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City ANNANDALE State VA Zip Code 22003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 07 / 06 / 2009
Transaction ID: SA.002
Amount of Each Receipt this Period: 3701.73
LIST RENTAL INCOME
USUAL AND CUSTOMARY MARKET RATE

B. Full Name (Last, First, Middle Initial)
DIAMOND LIST COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City ANNANDALE State VA Zip Code 22003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 08 / 06 / 2009
Transaction ID: SA.003
Amount of Each Receipt this Period: 3790.54
LIST RENTAL INCOME
USUAL AND CUSTOMARY MARKET RATE

C. Full Name (Last, First, Middle Initial)
DIAMOND LIST COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City ANNANDALE State VA Zip Code 22003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 09 / 03 / 2009
Transaction ID: SA.004
Amount of Each Receipt this Period: 7580.66
LIST RENTAL INCOME
USUAL AND CUSTOMARY MARKET RATE

SUBTOTAL of Receipts This Page (optional) ► 15072.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 54
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DIAMOND LIST COMPANY		Date of Receipt
	Mailing Address 6715 LITTLE RIVER TURNPIKE		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	ANNANDALE	VA	22003
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA.005
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="0.00"/>	<input type="text" value="15036.74"/>
			LIST RENTAL INCOME
			USUAL AND CUSTOMARY MARKET RATE

B.	Full Name (Last, First, Middle Initial) DIAMOND LIST COMPANY		Date of Receipt
	Mailing Address 6715 LITTLE RIVER TURNPIKE		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	ANNANDALE	VA	22003
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA.009
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="0.00"/>	<input type="text" value="7737.31"/>
			LIST RENTAL INCOME
			USUAL AND CUSTOMARY RATES

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="22774.05"/>
TOTAL This Period (last page this line number only)	<input type="text" value="37846.98"/>

**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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BOBBIE MURPHY	Transaction ID: SB.001
	Mailing Address 4815 WAYSIDE DRIVE	Date of Disbursement 07 / 15 / 2009
	City OLD HICKORY State TN Zip Code 37138	Amount of Each Disbursement this Period 1276.81
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) BOBBIE MURPHY	Transaction ID: SB.002
	Mailing Address 4815 WAYSIDE DRIVE	Date of Disbursement 07 / 31 / 2009
	City OLD HICKORY State TN Zip Code 37138	Amount of Each Disbursement this Period 1276.81
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) BOBBIE MURPHY	Transaction ID: SB.003
	Mailing Address 4815 WAYSIDE DRIVE	Date of Disbursement 08 / 13 / 2009
	City OLD HICKORY State TN Zip Code 37138	Amount of Each Disbursement this Period 1276.81
	Purpose of Disbursement PAYROLL	Category/Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	3830.43
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BOBBIE MURPHY	Transaction ID: SB.004 Date of Disbursement 08 / 31 / 2009
	Mailing Address 4815 WAYSIDE DRIVE	Amount of Each Disbursement this Period 1276.81
	City OLD HICKORY State TN Zip Code 37138	
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) AUSTIN WALNE	Transaction ID: SB.059 Date of Disbursement 09 / 30 / 2009
	Mailing Address 1760 OLD MEADOW ROAD	Amount of Each Disbursement this Period 46.00
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Category/Type
	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) ▼

UNCASHED CHECK VOIDED/UNABLE TO LOCATE EMPLOYEE/CONVERTED TO IN-KIND DONATION

C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB.005 Date of Disbursement 07 / 02 / 2009
	Mailing Address P.O. BOX 53852	Amount of Each Disbursement this Period 8.72
	City PHOENIX State AZ Zip Code 85072	
	Purpose of Disbursement CREDIT CARD PROCESSING FEES Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1331.53
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB.006 Date of Disbursement 08 / 05 / 2009
	Mailing Address P.O. BOX 53852	Amount of Each Disbursement this Period 7.04
	City PHOENIX State AZ Zip Code 85072	
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB.007 Date of Disbursement 08 / 07 / 2009
	Mailing Address P.O. BOX 297812	Amount of Each Disbursement this Period 1675.40
	City FT.LAUDERDALE State FL Zip Code 33329	
	Purpose of Disbursement STRATEGIC PLANNING DINNER	
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) THE CAUCUS ROOM	Transaction ID: SB.047 Date of Disbursement 08 / 07 / 2009
	Mailing Address 401 9TH STREET, NW	Amount of Each Disbursement this Period 1675.40
	City WASHINGTON State DC Zip Code 20001	
	Purpose of Disbursement STRATEGIC PLANNING DINNER	
	Candidate Name	Category/Type
	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1682.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address P.O. BOX 53852 City PHOENIX State AZ Zip Code 85072 Purpose of Disbursement CREDIT CARD PROCESSING 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) ▼	Transaction ID: SB.008 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2009
	Amount of Each Disbursement this Period 20.12

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address P.O. BOX 53852 City PHOENIX State AZ Zip Code 85072 Purpose of Disbursement CREDIT CARD PROCESSING 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) ▼	Transaction ID: SB.009 Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2009
	Amount of Each Disbursement this Period 2.65

C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address P.O. BOX 53852 City PHOENIX State AZ Zip Code 85072 Purpose of Disbursement CREDIT CARD PROCESSING 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) ▼	Transaction ID: SB.072 Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2009
	Amount of Each Disbursement this Period 16.56

SUBTOTAL of Disbursements This Page (optional) ▶	39.33
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input 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

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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS Mailing Address 10424 WOODBURY WOODS COURT City FAIRFAX State VA Zip Code 22032 Purpose of Disbursement STRATEGIC PLANNING/FUNDRAISING/ADMINISTR Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB.010 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2009
	Amount of Each Disbursement this Period 1000.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

B. Full Name (Last, First, Middle Initial) ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS Mailing Address 10424 WOODBURY WOODS COURT City FAIRFAX State VA Zip Code 22032 Purpose of Disbursement STRATEGIC PLANNING/FUNDRAISING/ADMINISTR Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB.011 Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2009
	Amount of Each Disbursement this Period 1000.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

C. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 LEESBURG PIKE City FALLS CHURCH State VA Zip Code 22043 Purpose of Disbursement FILE MAINTENANCE/COMPLIANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB.012 Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2009
	Amount of Each Disbursement this Period 2100.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	4100.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB.013
	Mailing Address 7704 LEESBURG PIKE	Date of Disbursement 08 / 07 / 2009
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period 2100.00
	Purpose of Disbursement FILE MAINTENANCE/COMPLIANCE	
	Candidate Name	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:	

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB.014
	Mailing Address 7704 LEESBURG PIKE	Date of Disbursement 09 / 10 / 2009
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period 2100.00
	Purpose of Disbursement FILE MAINTENANCE/COMPLIANCE	
	Candidate Name	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:	

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB.015
	Mailing Address 7704 LEESBURG PIKE	Date of Disbursement 10 / 05 / 2009
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period 2100.00
	Purpose of Disbursement FILE MAINTENANCE/COMPLIANCE	
	Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB.071 Date of Disbursement 11 / 16 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 2100.00
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement LIST MAINTENANCE/COMPLIANCE	
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) CW ACCOUNTING SERVICES	Transaction ID: SB.016 Date of Disbursement 08 / 07 / 2009
	Mailing Address 10424 WOODBURY WOODS COURT	Amount of Each Disbursement this Period 500.00
	City FAIRFAX State VA Zip Code 22032	
	Purpose of Disbursement PROF SERV ACCOUNTING	
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) CW ACCOUNTING SERVICES	Transaction ID: SB.017 Date of Disbursement 09 / 10 / 2009
	Mailing Address 10424 WOODBURY WOODS COURT	Amount of Each Disbursement this Period 500.00
	City FAIRFAX State VA Zip Code 22032	
	Purpose of Disbursement PROF SERV ACCOUNTING	
	Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	3100.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CW ACCOUNTING SERVICES	Transaction ID: SB.018 Date of Disbursement 10 / 05 / 2009
	Mailing Address 10424 WOODBURY WOODS COURT	Amount of Each Disbursement this Period 626.00
	City FAIRFAX State VA Zip Code 22032	
	Purpose of Disbursement PROF SERV ACCTG \$500/PO BOX RENT \$126	
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) THE UPS STORE	Transaction ID: SB.049 Date of Disbursement 10 / 05 / 2009
	Mailing Address 10332 MAIN STREET	Amount of Each Disbursement this Period 126.00
	City FAIRFAX State VA Zip Code 22030	
	Purpose of Disbursement PO BOX RENTAL	
	Candidate Name	Category/Type
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) CW ACCOUNTING SERVICES	Transaction ID: SB.057 Date of Disbursement 07 / 08 / 2009
	Mailing Address 10424 WOODBURY WOODS COURT	Amount of Each Disbursement this Period 626.00
	City FAIRFAX State VA Zip Code 22032	
	Purpose of Disbursement PROF SERV ACCTG \$500/PO BOX RENT \$126	
	Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	1252.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE UPS STORE	Transaction ID: SB.048 Date of Disbursement 07 / 08 / 2009
	Mailing Address 10332 MAIN STREET	Amount of Each Disbursement this Period 126.00
	City FAIRFAX State VA Zip Code 22030	
	Purpose of Disbursement PO BOX RENTAL	[MEMO ITEM]
	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.	Full Name (Last, First, Middle Initial) CW ACCOUNTING SERVICES	Transaction ID: SB.060 Date of Disbursement 11 / 16 / 2009
	Mailing Address 10424 WOODBURY WOODS COURT	Amount of Each Disbursement this Period 500.00
	City FAIRFAX State VA Zip Code 22032	
	Purpose of Disbursement PROF. SERVICES - ACCOUNTING	
	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) ▼	

C.	Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES	Transaction ID: SB.019 Date of Disbursement 07 / 02 / 2009
	Mailing Address 7300 CHAMPION HIGHWAY	Amount of Each Disbursement this Period 144.45
	City KNOXVILLE State TN Zip Code 37920	
	Purpose of Disbursement CREDIT CARD PROCESSING 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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

644.45

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES	Transaction ID: SB.020
	Mailing Address 7300 CHAMPION HIGHWAY	Date of Disbursement MM / DD / YYYY 08 / 04 / 2009
	City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period 101.83
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Category/ Type
	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.	Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES	Transaction ID: SB.021
	Mailing Address 7300 CHAMPION HIGHWAY	Date of Disbursement MM / DD / YYYY 09 / 02 / 2009
	City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period 108.19
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES	Transaction ID: SB.022
	Mailing Address 7300 CHAMPION HIGHWAY	Date of Disbursement MM / DD / YYYY 10 / 02 / 2009
	City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period 73.60
	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	283.62
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES	Transaction ID: SB.062
	Mailing Address 7300 CHAMPION HIGHWAY	Date of Disbursement MM / DD / YYYY 11 / 03 / 2009
	City KNOXVILLE State TN Zip Code 37920	Amount of Each Disbursement this Period 170.52
	Purpose of Disbursement CREDIT CARD PROCESSING CHARGES	Category/Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB.023
	Mailing Address P.O. BOX 660481	Date of Disbursement MM / DD / YYYY 07 / 08 / 2009
	City TALLAHASSEE State FL Zip Code 32309	Amount of Each Disbursement this Period 43.03
	Purpose of Disbursement DELIVERY	Category/Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB.024
	Mailing Address P.O. BOX 660481	Date of Disbursement MM / DD / YYYY 09 / 10 / 2009
	City TALLAHASSEE State FL Zip Code 32309	Amount of Each Disbursement this Period 56.98
	Purpose of Disbursement DELIVERY	Category/Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	270.53
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB.025 Date of Disbursement
	Mailing Address P.O. BOX 660481	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City TALLAHASSEE State FL Zip Code 32309	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY	<input type="text" value="16.25"/>
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	Transaction ID: SB.063 Date of Disbursement
	Mailing Address P.O. BOX 660481	<input type="text" value="11"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City TALLAHASSEE State FL Zip Code 32309	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY CHARGES	<input type="text" value="84.94"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) GLOBAL CROSSING	Transaction ID: SB.058 Date of Disbursement
	Mailing Address P.O. BOX 790407	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City ST. LOUIS State MO Zip Code 63179	Amount of Each Disbursement this Period
	Purpose of Disbursement TELECOMMUNICATIONS	<input type="text" value="5348.84"/>
	Candidate Name	Category/Type
	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) ▼

DISPUTED AMOUNT RESOLVED

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5450.03"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JONES AND MCINTYRE	Transaction ID: SB.026
	Mailing Address 6225 BRANDON AVENUE SUITE 307	Date of Disbursement 10 / 05 / 2009
	City SPRINGFIELD State VA Zip Code 22150	Amount of Each Disbursement this Period 720.00
	Purpose of Disbursement ACCOUNTING SERVICES	Category/Type
	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.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.027
	Mailing Address 22 CENTURY BLVD. SUITE 150	Date of Disbursement 07 / 10 / 2009
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period 114.55
	Purpose of Disbursement PAYROLL PROCESSING FEE	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.028
	Mailing Address 22 CENTURY BLVD. SUITE 150	Date of Disbursement 07 / 15 / 2009
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period 337.94
	Purpose of Disbursement PAYROLL TAXES	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	1172.49
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 22 CENTURY BLVD. SUITE 150 <hr/> City NASHVILLE State TN Zip Code 37229 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: SB.029 Date of Disbursement 07 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 337.94
B.	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 22 CENTURY BLVD. SUITE 150 <hr/> City NASHVILLE State TN Zip Code 37229 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: SB.030 Date of Disbursement 07 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 54.00
C.	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 22 CENTURY BLVD. SUITE 150 <hr/> City NASHVILLE State TN Zip Code 37229 <hr/> Purpose of Disbursement PAYROLL PROCESSING FEE Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: SB.031 Date of Disbursement 08 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 122.33

SUBTOTAL of Disbursements This Page (optional) ▶

514.27

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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

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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.032
	Mailing Address 22 CENTURY BLVD. SUITE 150	Date of Disbursement MM / DD / YYYY 08 / 14 / 2009
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period 337.94
	Purpose of Disbursement PAYROLL TAXES	Category/ Type
	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.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.033
	Mailing Address 22 CENTURY BLVD. SUITE 150	Date of Disbursement MM / DD / YYYY 08 / 31 / 2009
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period 337.94
	Purpose of Disbursement PAYROLL TAXES	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.034
	Mailing Address 22 CENTURY BLVD. SUITE 150	Date of Disbursement MM / DD / YYYY 09 / 10 / 2009
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period 114.38
	Purpose of Disbursement PAYROLL PROCESSING FEE	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	790.26
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.035 Date of Disbursement
	Mailing Address 22 CENTURY BLVD. SUITE 150	<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL PROCESSING FEE	<input type="text" value="46.95"/>
	Candidate Name	Category/ Type
	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.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.064 Date of Disbursement
	Mailing Address 22 CENTURY BLVD. SUITE 150	<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City NASHVILLE State TN Zip Code 37229	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL PROCESSING CHARGES	<input type="text" value="39.00"/>
	Candidate Name	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: SB.036 Date of Disbursement
	Mailing Address 1751 OLD MEADOW ROAD	<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City MCLEAN State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement STORAGE	<input type="text" value="2532.00"/>
	Candidate Name	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2617.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) RJD GROUP	Transaction ID: SB.037
	Mailing Address P.O. BOX 210753	Date of Disbursement MM / DD / YYYY 07 / 08 / 2009
	City NASHVILLE State TN Zip Code 37221	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement PROF. SERV - MEDIA/PUBLIC RELATIONS	Category/ Type
	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.	Full Name (Last, First, Middle Initial) RJD GROUP	Transaction ID: SB.038
	Mailing Address P.O. BOX 210753	Date of Disbursement MM / DD / YYYY 08 / 07 / 2009
	City NASHVILLE State TN Zip Code 37221	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement PROF. SERV - MEDIA/PUBLIC RELATIONS	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) SENDLABS	Transaction ID: SB.039
	Mailing Address 121 RIVER FRONT DRIVE, # 2	Date of Disbursement MM / DD / YYYY 07 / 08 / 2009
	City MANCHESTER State NH Zip Code 03102	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement WEB-BASED DONOR CONTACT	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	5750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) SENDLABS	Transaction ID: SB.040
	Mailing Address 121 RIVER FRONT DRIVE, # 2	Date of Disbursement 08 / 07 / 2009
	City MANCHESTER State NH Zip Code 03102	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement WEB-BASED DONOR CONTACT	Category/ Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) SENDLABS	Transaction ID: SB.041
	Mailing Address 121 RIVER FRONT DRIVE, # 2	Date of Disbursement 09 / 10 / 2009
	City MANCHESTER State NH Zip Code 03102	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement WEB-BASED DONOR CONTACT	Category/ Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) SENDLABS	Transaction ID: SB.042
	Mailing Address 121 RIVER FRONT DRIVE, # 2	Date of Disbursement 10 / 05 / 2009
	City MANCHESTER State NH Zip Code 03102	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement WEB-BASED DONOR CONTACT	Category/ Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) SENDLABS	Transaction ID: SB.065
	Mailing Address 121 RIVER FRONT DRIVE, # 2	Date of Disbursement MM / DD / YYYY 11 / 16 / 2009
	City MANCHESTER State NH Zip Code 03102	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement WEB DONOR CONTACT	Category/Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) SPELNA, INC.	Transaction ID: SB.043
	Mailing Address 225 INDUSTRIAL COURT	Date of Disbursement MM / DD / YYYY 07 / 08 / 2009
	City FREDERICKSBURG State VA Zip Code 22408	Amount of Each Disbursement this Period 13.68
	Purpose of Disbursement STORAGE	Category/Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) SPELNA, INC.	Transaction ID: SB.044
	Mailing Address 225 INDUSTRIAL COURT	Date of Disbursement MM / DD / YYYY 08 / 07 / 2009
	City FREDERICKSBURG State VA Zip Code 22408	Amount of Each Disbursement this Period 13.68
	Purpose of Disbursement STORAGE	Category/Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	777.36
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SPELNA, INC.</p> <p>Mailing Address 225 INDUSTRIAL COURT</p> <p>City FREDERICKSBURG State VA Zip Code 22408</p> <p>Purpose of Disbursement STORAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.045</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.68"/></p>
<p>B. Full Name (Last, First, Middle Initial) SPELNA, INC.</p> <p>Mailing Address 225 INDUSTRIAL COURT</p> <p>City FREDERICKSBURG State VA Zip Code 22408</p> <p>Purpose of Disbursement STORAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.046</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.68"/></p>
<p>C. Full Name (Last, First, Middle Initial) SPELNA, INC.</p> <p>Mailing Address 225 INDUSTRIAL COURT</p> <p>City FREDERICKSBURG State VA Zip Code 22408</p> <p>Purpose of Disbursement STORAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.066</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.68"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="41.04"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRIO STRATEGIES	Transaction ID: SB.050 Date of Disbursement
	Mailing Address 9146 WOOD POINTE WAY	<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City FAIRFAX STATION State VA Zip Code 22039	Amount of Each Disbursement this Period
	Purpose of Disbursement THANK YOU LETTERS	<input type="text" value="175.40"/>
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: SB.051 Date of Disbursement
	Mailing Address 86 MAPLE AVENUE	<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City NEW CITY State NY Zip Code 10956	Amount of Each Disbursement this Period
	Purpose of Disbursement MAIL MONITORING	<input type="text" value="118.50"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: SB.052 Date of Disbursement
	Mailing Address 86 MAPLE AVENUE	<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City NEW CITY State NY Zip Code 10956	Amount of Each Disbursement this Period
	Purpose of Disbursement MAIL MONITORING	<input type="text" value="5.25"/>
	Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="299.15"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: SB.053 Date of Disbursement 09 / 10 / 2009
	Mailing Address 86 MAPLE AVENUE	Amount of Each Disbursement this Period 7.50
	City NEW CITY State NY Zip Code 10956	
	Purpose of Disbursement MAIL MONITORING	Category/ Type
	Candidate Name	
	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:	

B.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: SB.067 Date of Disbursement 11 / 16 / 2009
	Mailing Address 86 MAPLE AVENUE	Amount of Each Disbursement this Period 4.00
	City NEW CITY State NY Zip Code 10956	
	Purpose of Disbursement MAIL MONITORING	Category/ Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) WEBSTER, CHAMBERLAIN AND BEAN	Transaction ID: SB.068 Date of Disbursement 11 / 16 / 2009
	Mailing Address 1747 PENNSYLVANIA AVENUE, NW	Amount of Each Disbursement this Period 702.60
	City WASHINGTON State DC Zip Code 20006	
	Purpose of Disbursement LEGAL SERVICES	Category/ Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	714.10
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) YUMA SOLUTIONS</p> <p>Mailing Address P.O. BOX 152075</p> <p>City TALLHASSEE State FL Zip Code 33684</p> <p>Purpose of Disbursement WEB HOSTING/SERVER MAINTENANCE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.054</p> <p>Date of Disbursement 09 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) YUMA SOLUTIONS, INC</p> <p>Mailing Address P.O. BOX 152075</p> <p>City TALLHASSEE State FL Zip Code 33684</p> <p>Purpose of Disbursement WEB HOSTING/SERVER MAINTENANCE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.055</p> <p>Date of Disbursement 07 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

2600.00

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

45810.98

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)
FRED THOMPSON POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOFFMAN FOR CONGRESS	Transaction ID: SB.056 Date of Disbursement 11 / 13 / 2009
	Mailing Address 111 RIVER STREET	Amount of Each Disbursement this Period 20.00
	City SARANAC LAKE State NY Zip Code 12983	
	Purpose of Disbursement TRANSMITTAL EARMARKED CONTRIBUTIONS	
	Candidate Name DOUGLAS L. HOFFMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
		DONOR SHEILA LINDER, 275-74 78TH AVENUE, NW, STANWOOD, WA 98292. EARMARKED CONTRIBUTION FORWARDED.

B.	Full Name (Last, First, Middle Initial) HOFFMAN FOR CONGRESS	Transaction ID: SB.069 Date of Disbursement 11 / 13 / 2009
	Mailing Address 111 RIVER STREET	Amount of Each Disbursement this Period 50.00
	City SARANAC LAKE State NY Zip Code 12983	
	Purpose of Disbursement TRANSMITTAL EARMARKED CONTRIBUTIONS	
	Candidate Name DOUGLAS L. HOFFMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
		DONOR PAUL EATON, 229 VI STA SPRINGS CIRCLE, LEXINGTON, SC 29072. EARMARKED CONTRIBUTION FORWARDED.

C.	Full Name (Last, First, Middle Initial) HOFFMAN FOR CONGRESS	Transaction ID: SB.070 Date of Disbursement 10 / 19 / 2009
	Mailing Address 111 RIVER STREET	Amount of Each Disbursement this Period 5000.00
	City SARANAC LAKE State NY Zip Code 12983	
	Purpose of Disbursement CONTRIBUTION	
	Candidate Name DOUGLAS L. HOFFMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5070.00
TOTAL This Period (last page this line number only)	5070.00