

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Calumet PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
1	6

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		82817.53
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	82817.53									
(c) Total Receipts (from Line 19)	34200.00	34200.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	117017.53	117017.53								
7. Total Disbursements (from Line 31)	59650.00	59650.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57367.53	57367.53								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Calumet PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
1	6

Y	Y	Y	Y
2	0	0	8

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)	16800.00	16800.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16800.00	16800.00
(b) Political Party Committees	13000.00	13000.00
(c) Other Political Committees (such as PACs)	4400.00	4400.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34200.00	34200.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34200.00	34200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34200.00	34200.00

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.....	2850.00	2850.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2850.00	2850.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	16000.00
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	10000.00	10000.00
(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))	10000.00	10000.00
29. Other Disbursements.....	30800.00	30800.00
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))..	59650.00	59650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59650.00	59650.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	34200.00	34200.00
34. Total Contribution Refunds (from Line 28(d))	10000.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24200.00	24200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2850.00	2850.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2850.00	2850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16
(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)
Calumet PAC

A.

Full Name (Last, First, Middle Initial) Rebecca Kingerly DeRosa		Date of Receipt <table border="1" style="font-size: small; border-collapse: collapse;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	4		2	0	0	8													
Mailing Address 1101 South Arlington Ridge Road Apartment 616		Transaction ID: C4697063																				
City Arlington	State VA	Zip Code 22202-1926																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td style="text-align: right;">1300.00</td></tr></table>	1300.00																			
1300.00																						
Name of Employer PMA Group	Occupation Government Relations																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%;"><tr><td style="text-align: right;">2500.00</td></tr></table>	2500.00																				
2500.00																						

B.

Full Name (Last, First, Middle Initial) Rebecca Kingerly DeRosa		Date of Receipt <table border="1" style="font-size: small; border-collapse: collapse;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	4		2	0	0	8													
Mailing Address 1101 South Arlington Ridge Road Apartment 616		Transaction ID: C7199054																				
City Arlington	State VA	Zip Code 22202-1926																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td style="text-align: right;">1200.00</td></tr></table>	1200.00																			
1200.00																						
Name of Employer PMA Group	Occupation Government Relations																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%;"><tr><td style="text-align: right;">2500.00</td></tr></table>	2500.00																				
2500.00																						

C.

Full Name (Last, First, Middle Initial) Richard E. Eford		Date of Receipt <table border="1" style="font-size: small; border-collapse: collapse;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	0		2	0	0	8													
Mailing Address 6400 Velliety Lane		Transaction ID: C4697068																				
City Springfield	State VA	Zip Code 22152-2245																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td style="text-align: right;">2500.00</td></tr></table>	2500.00																			
2500.00																						
Name of Employer PMA Group	Occupation Executive Vice President																					
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%;"><tr><td style="text-align: right;">2500.00</td></tr></table>	2500.00																				
2500.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: right;">5000.00</td></tr></table>	5000.00
5000.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="text-align: right;"> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Calumet PAC

A. Full Name (Last, First, Middle Initial)
Julie Giardina

Mailing Address 4500 - 28th Road South
Apartment D

City Arlington State VA Zip Code 22206-3311

FEC ID number of contributing federal political committee. C

Name of Employer PMA Group Occupation Associate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
03 / 12 / 2008

Transaction ID: C4799839

Amount of Each Receipt this Period 2000.00

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

Mailing Address 12769 Quarterhorse Lane

City Woodbridge State VA Zip Code 22192-5047

FEC ID number of contributing federal political committee. C

Name of Employer PMA Group Occupation Associate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
02 / 21 / 2008

Transaction ID: C4697069

Amount of Each Receipt this Period 2500.00

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

Mailing Address 10203 Woodvale Pond Drive

City Fairfax Station State VA Zip Code 22039-1658

FEC ID number of contributing federal political committee. C

Name of Employer PMA Group Occupation Government Relations

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
03 / 05 / 2008

Transaction ID: C4705792

Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional) 7000.00

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 8 / 16

(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)
Calumet PAC

A.

Full Name (Last, First, Middle Initial)
Paul J. Magliochetti

Mailing Address 1101 South Arlington Ridge Road
Apartment 616

City State Zip Code
Arlington VA 22202-1926

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

Name of Employer Occupation
PMA Group President

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 8

Transaction ID: C4697067

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Act I, LLC

Mailing Address 1105 Wooded Acres Drive
Suite 500

City State Zip Code
Waco TX 76710-4475

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: C4888103

Amount of Each Receipt this Period

2300.00

PARTNERSHIP--partners below if itemized

C.

Full Name (Last, First, Middle Initial)
Michael Niggel

Mailing Address 2719 North Quebec Street

City State Zip Code
Arlington VA 22207-5212

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

Name of Employer Occupation
Act I Managing Director

Receipt For: 2008
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: C4888104

Amount of Each Receipt this Period

2300.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

16800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 16	
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" 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) Calumet PAC
--

A.

Full Name (Last, First, Middle Initial) DCCC		Date of Receipt																				
Mailing Address 430 South Capitol Street SE		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	5		2	0	0	8													
City	State	Zip Code																				
Washington	DC	20003-4024																				
FEC ID number of contributing federal political committee.		Transaction ID: C4803847																				
<input checked="" type="checkbox"/> C C00000935		Amount of Each Receipt this Period																				
Name of Employer		<table border="1"><tr><td>13000.00</td></tr></table>	13000.00																			
13000.00																						
Occupation																						
Receipt For:	Aggregate Year-to-Date ▼																					
<input type="checkbox"/> Primary <input type="checkbox"/> General	<table border="1"><tr><td>13000.00</td></tr></table>		13000.00																			
13000.00																						
<input type="checkbox"/> Other (specify) ▼																						

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>13000.00</td></tr></table>	13000.00
13000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>13000.00</td></tr></table>	13000.00
13000.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 16
	(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)
Calumet PAC

A.

Full Name (Last, First, Middle Initial) 21 CSI PAC		Date of Receipt																				
Mailing Address 2611 Jefferson Davis Highway Suite 11100		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	2		2	0	0	8													
City	State	Zip Code																				
Arlington	VA	22202-4016																				
FEC ID number of contributing federal political committee.		Transaction ID: C4799840																				
C C00419044		Amount of Each Receipt this Period																				
		4400.00																				
Name of Employer	Occupation																					
Receipt For: 2008	Aggregate Year-to-Date ▼																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		4400.00																				
<input type="checkbox"/> Other (specify) ▼																						

SUBTOTAL of Receipts This Page (optional)	▶	4400.00
TOTAL This Period (last page this line number only)	▶	4400.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
Calumet PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Terrence J. Bronowski

Transaction ID: D296810
Date of Disbursement

Mailing Address 8000 Utah Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	0	8

City State Zip Code
Merrillville IN 46410-6641

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Accounting, Consulting, Rent
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Mr. Terrence J. Bronowski

Transaction ID: D296811
Date of Disbursement

Mailing Address 8000 Utah Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	8

City State Zip Code
Merrillville IN 46410-6641

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Accounting, Consulting, Rent
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Terrence J. Bronowski

Transaction ID: D296813
Date of Disbursement

Mailing Address 8000 Utah Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	8

City State Zip Code
Merrillville IN 46410-6641

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Accounting, Consulting, Rent
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 12 / 16

<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)
Calumet PAC

A.	Full Name (Last, First, Middle Initial) Mr. Terrence J. Bronowski Mailing Address 8000 Utah Street City Merrillville State IN Zip Code 46410-6641 Purpose of Disbursement Accounting, Consulting, Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D296814 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) NGP Software Mailing Address 1225 I Street, NW Suite 1225 City Washington State DC Zip Code 20005-5918 Purpose of Disbursement Online Database Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D279761 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 8 Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) NGP Software Mailing Address 1225 I Street, NW Suite 1225 City Washington State DC Zip Code 20005-5918 Purpose of Disbursement Online Database Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D280563 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 1800.00

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	2850.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Calumet PAC

A.

Full Name (Last, First, Middle Initial)
DCCC

Mailing Address 430 South Capitol Street SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D296471
Date of Disbursement

04 / 03 / 2008

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)
Shuler for Congress

Mailing Address Post Office Box 8446

City Asheville State NC Zip Code 28814

Purpose of Disbursement
Donation

Candidate Name
Heath Shuler

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 11

Transaction ID: D296470
Date of Disbursement

01 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

16000.00

TOTAL This Period (last page this line number only)

16000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 14 / 16

<input 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 checked="" 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)
Calumet PAC

A. Full Name (Last, First, Middle Initial) Ms. Barbara White <hr/> Mailing Address 1111 Whitehall Drive <hr/> City Crown Point State IN Zip Code 46307-5072 <hr/> Purpose of Disbursement Refund of Excessive Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D295346 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
B. Full Name (Last, First, Middle Initial) Mr. Dean V. White <hr/> Mailing Address 1111 Whitehall Drive <hr/> City Crown Point State IN Zip Code 46307-5072 <hr/> Purpose of Disbursement Refund of Excessive Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D295345 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

10000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Calumet PAC

<p>A. Full Name (Last, First, Middle Initial) Andre Carson for Congress</p> <p>Mailing Address 2527 North Alabama Street</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name Andre Carson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D296467</p> <p>Date of Disbursement 04 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Andre Carson for Congress</p> <p>Mailing Address 2527 North Alabama Street</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name Andre Carson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280562</p> <p>Date of Disbursement 02 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens to Elect Mike Brown</p> <p>Mailing Address Post Office Box 64687</p> <p>City Gary State IN Zip Code 46403</p> <p>Purpose of Disbursement Donation</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280166</p> <p>Date of Disbursement 01 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5800.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Calumet PAC

A.

Full Name (Last, First, Middle Initial)
Indiana House Democratic Caucus

Transaction ID: D296468

Date of Disbursement

Mailing Address Post Office Box 1617

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	8

City Indianapolis State IN Zip Code 46206-1617

Amount of Each Disbursement this Period

25000.00

Purpose of Disbursement
Transfer of Excess Funds

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

25000.00

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

30800.00
