

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

National Campaign Fund

ADDRESS (number and street)

30011 Ivy Glenn Drive, Suite 223

☐Check if different  
than previously  
reported. (ACC)

Laguna Niguel

CA

92677

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00437822

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

16

2008

through

11

24

2008

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

Type or Print Name of Treasurer

James Lacy

Signature of Treasurer

Electronically Filed by James Lacy

Date

03

23

2009

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
National Campaign Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period .....	49518.23	
(c) Total Receipts (from Line 19) .....	357579.67	1834199.26
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	407097.90	1834199.26
7. Total Disbursements (from Line 31) .....	341521.25	1787684.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	65576.65	65576.65
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	21122.00	

☐ 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)

Page 3

Write or Type Committee Name  
National Campaign Fund

Report Covering the Period:

From:

M M D D Y Y W Y  
1 0 1 6 2 0 0 8

To:

M M D D Y Y W Y  
1 1 2 4 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	87133.06	655507.44
(i) Itemized (use Schedule A) .....	270446.61	1173691.82
(ii) Unitemized .....	357579.67	1829199.26
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	357579.67	1829199.26
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	5000.00
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)) .....	357579.67	1834199.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	357579.67	1834199.26

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	46316.14	234029.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	46316.14	234029.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	295205.11	1548622.15
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	5000.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	33.25
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))..	341521.25	1787684.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	341521.25	1787684.61

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	357579.67	1829199.26
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	357579.67	1829199.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46316.14	234029.21
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46316.14	234029.21

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

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

FOR LINE NUMBER: PAGE 6 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MRS MARY EARLE DRAWDY

Mailing Address 645 PIEDMONT GOLF COURSE RD

City

PIEDMONT

State

SC

Zip Code

29673

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 6 / 2 0 0 8

Transaction ID: INC.A.13663

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Lori Eubanks

Mailing Address 23 Thorncreek Ct.

City

The Woodlands

State

TX

Zip Code

77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker & Volunteer

Occupation

Homemaker

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 6 / 2 0 0 8

Transaction ID: INC.A.14173

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Joan Mcarthur

Mailing Address 6387 Nw 23rd Ct

City

Boca Raton

State

FL

Zip Code

33496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 6 / 2 0 0 8

Transaction ID: INC.A.14294

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

425.00

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 7 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GLADYS B THOMEY

Mailing Address 406 ATWATER ST

City

BURLINGTON

State

NC

Zip Code

27215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 8

Transaction ID: INC.A.13652

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

MRS HILDEGARD BANDY

Mailing Address 1539 GRAND AVE

City

MEDFORD

State

OR

Zip Code

97504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13904

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS ELIZABETH P BERGBOWER

Mailing Address 102 GLENMOOR CIR S

City

EASTON

State

PA

Zip Code

18045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED AIRLINES

Occupation

RETIRED AIRLINE STEWARDESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13628

Amount of Each Receipt this Period

500.00

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

640.00

**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 8 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ZETTA R BOLTON

Mailing Address 2147 RONDA GRANADA UNIT D

City

LAGUNA WOODS

State

CA

Zip Code

92637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13875

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Pamela Borden

Mailing Address 10677 Brooks Street

City

Indianapolis

State

IN

Zip Code

46234

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Technology Project Manager

Occupation

Trasys LLC

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13518

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR NEAL CHASTAIN

Mailing Address 7608 UTICA AVE

City

LUBBOCK

State

TX

Zip Code

79424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13821

Amount of Each Receipt this Period

75.00

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

475.00

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



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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT W CORNELL

Mailing Address 80 LOEFFLER RD APT G # 404C

City

BLOOMFIELD

State

CT

Zip Code

6002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13589

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

DR NATHAN PIERCE COUCH

Mailing Address 5 HIGH ROCK RD

City

DOVER

State

MA

Zip Code

2030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13575

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MR FRANK CUSUMANO

Mailing Address 2009 N COMMERCE ST

City

STOCKTON

State

CA

Zip Code

95204

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 ▼

3510.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13886

Amount of Each Receipt this Period

2000.00

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

2350.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Paul Delaney

Mailing Address 2899 North Garrett Lane

City State Zip Code  
Flagstaff AZ 86001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.15169

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MRS JANE B LAIRD

Mailing Address 4031 KENNETT PIKE APT 163

City State Zip Code  
GREENVILLE DE 19807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13639

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MISS DOROTHY M LINCOLN

Mailing Address 7026 COUNTY ROAD 12

City State Zip Code  
NAPLES NY 14512

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.71

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13622

Amount of Each Receipt this Period

150.00

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

750.00

**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 11 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GRACE MARSHMAN

Mailing Address 39 PALSA AVE

City

ELMWOOD PARK

State

NJ

Zip Code

7407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13591

Amount of Each Receipt this Period

80.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE L RAWLS

Mailing Address 1715 BELLEVUE AVE APT B327

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13648

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Gilia Rethman

Mailing Address 47-140 Heno Place

City

Kaneohe

State

HI

Zip Code

96744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation  
Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.14040

Amount of Each Receipt this Period

35.00

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

215.00

**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 12 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Raymond Salzman

Mailing Address 11151 Rawhide Rd.

City

Lusby,

State

MD

Zip Code

20657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.14047

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR W LEONARD SEELEY

Mailing Address 10351 KENWOOD DR

City

GRASS VALLEY

State

CA

Zip Code

95949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13890

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MR RONALD L TODD

Mailing Address 5081 HIGHCLIFF DR APT E11

City

NORTH LITTLE ROCK

State

AR

Zip Code

72116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1862.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13794

Amount of Each Receipt this Period

1000.00

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

1325.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS GLADYS A WEBER

Mailing Address 204 E SUSQUEHANNA AVE

City

TOWSON

State

MD

Zip Code

21286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13644

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

MS GLADYS A WEBER

Mailing Address 204 E SUSQUEHANNA AVE

City

TOWSON

State

MD

Zip Code

21286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13643

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR WALTER L WHITCOMB, JR

Mailing Address 39480 N CAMBRIDGE BLVD

City

WADSWORTH

State

IL

Zip Code

60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13749

Amount of Each Receipt this Period

100.00

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

235.00

**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 14 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City State Zip Code  
Tulsa OK 74105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14512

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Brian Harrington

Mailing Address 6 Rooster Ridge Rd

City State Zip Code  
Newtown CT 06470

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Recruiter

Occupation  
Gms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: INC.A.14574

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Kenneth Lyons

Mailing Address 448 Gibbs Avenue #1  
Newport

City State Zip Code  
RI 02

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: INC.A.14279

Amount of Each Receipt this Period

25.00

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

2575.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Lori Eubanks

Mailing Address 23 Thorncreek Ct.

City

The Woodlands

State

TX

Zip Code

77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker & Volunteer

Occupation

Homemaker

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 9 / 2 0 0 8

Transaction ID: INC.A.14174

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Nick Gianitsos

Mailing Address 1237 Geneva National Ave, West

City

Lake Geneva

State

WI

Zip Code

53147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Physician

Occupation

Mercy Health System

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14926

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Gary Muren

Mailing Address 24200 Woodfield School Road

City

Gaithersburg

State

MD

Zip Code

20882

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Professor / Director

Occupation

Univ. Of Maryland UC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14312

Amount of Each Receipt this Period

25.00

**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 16 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Charles Snider

Mailing Address 6062 Lakewood Dr.  
Gilmer

City State Zip Code  
TX 75

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14382

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR GORDON W BAILEY

Mailing Address 7540 OGELSBY AVE

City State Zip Code  
LOS ANGELES CA 90045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13866

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City State Zip Code  
CINCINNATI OH 45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

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

Transaction ID: INC.A.13714

Amount of Each Receipt this Period

100.00

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

275.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City

LENA

State

IL

Zip Code

61048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13760

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR KLAUS W BECKMANN

Mailing Address PO BOX 167

City

AMSTERDAM

State

NY

Zip Code

12010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CHEMICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: INC.A.13619

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MS LEVONNE G BREEDEN

Mailing Address 3005 MAZANEC RD

City

WACO

State

TX

Zip Code

76705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

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

Transaction ID: INC.A.13803

Amount of Each Receipt this Period

100.00

**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 18 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Gail Brown

Mailing Address 4505 California Ave Unit 205

City

Long Beach

State

CA

Zip Code

90807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rn

Occupation

Long Beach Memorial Medical Center

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14117

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR NEAL CHASTAIN

Mailing Address 7608 UTICA AVE

City

LUBBOCK

State

TX

Zip Code

79424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: INC.A.13822

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

William Childs

Mailing Address 3538 Eastwind St

City

Indianapolis

State

IN

Zip Code

46227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: INC.A.14135

Amount of Each Receipt this Period

25.00

**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 19 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN C CLEGG

Mailing Address 1785 N 1500 E

City

PROVO

State

UT

Zip Code

84604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.13844

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS SHIRLEY R COMON

Mailing Address 457 CALLE MAYOR

City

REDONDO BEACH

State

CA

Zip Code

90277

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAUL S PHOTO, INC.

Occupation

SELF-EMPLOYED BOOKKEEPER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

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

Transaction ID: INC.A.13873

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MR SERGIO P DALMAU

Mailing Address 600 GRAPETREE DR APT 7ES

City

KEY BISCAVNE

State

FL

Zip Code

33149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
P.T.E. STRAND CO., INC.

Occupation

CIVIL ENGINEER/BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13684

Amount of Each Receipt this Period

300.00

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

700.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARGARET B DAVIDSON

Mailing Address 611 N ALPINE DR

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

INVESTMENTS/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13868

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS MARGARET B DAVIDSON

Mailing Address 611 N ALPINE DR

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

INVESTMENTS/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13869

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS JOYCE B DOHENY

Mailing Address 4383 ROYAL PL

City

HONOLULU

State

HI

Zip Code

96816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2850.00

Date of Receipt

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

Transaction ID: INC.A.13897

Amount of Each Receipt this Period

200.00

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

400.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MISS RUTH A FERNANDES

Mailing Address 1717 NORFOLK AVE APT 1219

City

LUBBOCK

State

TX

Zip Code

79416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

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

Transaction ID: INC.A.13818

Amount of Each Receipt this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

Louise Garcia

Mailing Address 607 S. Friendswood

City

Friendswood

State

TX

Zip Code

77546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Curves For Women

Occupation  
Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: INC.A.13980

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

DR BRIT B GAY, JR

Mailing Address 911 VISTAVIA CIR

City

DECATUR

State

GA

Zip Code

30033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RADIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

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

Transaction ID: INC.A.13669

Amount of Each Receipt this Period

500.00

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

875.00

**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 22 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

CAMERON D GLIDEWELL

Mailing Address 1227 LE GRAY AVE

City

LOS ANGELES

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DISNEY

Occupation

TELEVISION ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13860

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

SGT BILLY W GRIMES, RET

Mailing Address 4146 FURMAN DR # B

City

MOBILE

State

AL

Zip Code

36619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALAGANEY TECH

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.13692

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MS LENOLA GRISMORE

Mailing Address 4589 RD O # 8

City

PANDORA

State

OH

Zip Code

45877

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 ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13721

Amount of Each Receipt this Period

200.00

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

420.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS HELEN B HALPERN

Mailing Address 4027 FAIRFAX RD

City

EVANSVILLE

State

IN

Zip Code

47710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: INC.A.13727

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MS MARGARET-MARY HASSELBERG

Mailing Address 8538 98TH ST

City

WOODHAVEN

State

NY

Zip Code

11421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

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

Transaction ID: INC.A.13616

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR EUGENE J IDONE

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

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

Transaction ID: INC.A.13612

Amount of Each Receipt this Period

200.00

**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 24 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR VICTOR JOHN JAWORSKY

Mailing Address PO BOX 196

City

ORANGEBURG

State

NY

Zip Code

10962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

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

Transaction ID: INC.A.13606

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

MS DORA Y KUNISHIGE

Mailing Address 1117 W 122ND ST

City

LOS ANGELES

State

CA

Zip Code

90044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

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

Transaction ID: INC.A.13863

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

MS DORA Y KUNISHIGE

Mailing Address 1117 W 122ND ST

City

LOS ANGELES

State

CA

Zip Code

90044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

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

Transaction ID: INC.A.13864

Amount of Each Receipt this Period

200.00

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

380.00

**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 25 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR GEORGE C KUNKEL

Mailing Address 9552 HIGHEDGE DR

City

DALLAS

State

TX

Zip Code

75238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNT PETROLEUM CORP.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13799

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR LEWIS W LEHR

Mailing Address 10040 E HAPPY VALLEY RD  
APT 604

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEHR FAMILY TRUST

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13848

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Floyd Lewis

Mailing Address 804 Shannondale Way  
Maryville

City

TN

State

37

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.14009

Amount of Each Receipt this Period

25.00

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

325.00

**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 26 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ELIZABETH M MC LEAN

Mailing Address 106 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13666

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR VERNON M NEFF

Mailing Address PO BOX 426

City

LAKIN

State

KS

Zip Code

67860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13786

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR LEROY OLSAK

Mailing Address PO BOX 60347

City

SAN ANGELO

State

TX

Zip Code

76906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

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

Transaction ID: INC.A.13806

Amount of Each Receipt this Period

202.00

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

402.00

**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 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR FORREST E OTT

Mailing Address 107 FRONTAGE RD

City

SUMMERVILLE

State

SC

Zip Code

29485

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F.

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: INC.A.13660

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS MARILYN PAOLICELLI

Mailing Address 1043 SOLDIER HILL RD

City

ORADELL

State

NJ

Zip Code

7649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.13

Date of Receipt

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

Transaction ID: INC.A.13594

Amount of Each Receipt this Period

502.13

**C.**

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13743

Amount of Each Receipt this Period

20.00

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

622.13

**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 28 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13742

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MS KAY G POITRAS

Mailing Address 27 LAKE HAMILTON BEACH

City

HAINES CITY

State

FL

Zip Code

33844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.08

Date of Receipt

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

Transaction ID: INC.A.13685

Amount of Each Receipt this Period

202.08

**C.**

Full Name (Last, First, Middle Initial)

Howard Rabin

Mailing Address 1455 West Loop South Suite 700  
Houston

City

TX

State

77

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.14036

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

352.08

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 29 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS LUCILLE C RAWLS

Mailing Address 4008 SHADOW CREST RD

City

KINGMAN

State

AZ

Zip Code

86409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13854

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Larry Rigdon

Mailing Address 914 Main Street, Suite 1805

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

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

Transaction ID: INC.A.14043

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MS LOUISE M RUCKER

Mailing Address 3712 HEATH ST

City

GREENSBORO

State

NC

Zip Code

27401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.50

Date of Receipt

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

Transaction ID: INC.A.13657

Amount of Each Receipt this Period

100.00

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

425.00

**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 30 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS CLARA B SCANCARELLO

Mailing Address 63 CONWELL AVE

City State Zip Code  
SOMERVILLE MA 2144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.08

Date of Receipt

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

Transaction ID: INC.A.13577

Amount of Each Receipt this Period

200.08

**B.**

Full Name (Last, First, Middle Initial)  
MS JANET E SCHRODER

Mailing Address 75450 ROAD 330

City State Zip Code  
GRANT NE 69140

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13789

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Eric Schultz

Mailing Address 4415 Middle Ridge Drive  
Fairfax

City State Zip Code  
VA 22

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14365

Amount of Each Receipt this Period

25.00

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

325.08

**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 31 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR HARRY W SHADE

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: INC.A.13829

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR HUBERT E SHADRICK

Mailing Address 5821 200TH ST SW APT 127

City

LYNNWOOD

State

WA

Zip Code

98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNOHOMISH COUNTY

Occupation

RETIRED ROAD WORKER-GREASE MONKEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13912

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR HUBERT E SHADRICK

Mailing Address 5821 200TH ST SW APT 127

City

LYNNWOOD

State

WA

Zip Code

98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNOHOMISH COUNTY

Occupation

RETIRED ROAD WORKER-GREASE MONKEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13911

Amount of Each Receipt this Period

100.00

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JAMES D SIMPSON, III

Mailing Address 18 ARMISTEAD RD

City

LITTLE ROCK

State

AR

Zip Code

72207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STEPHENS, INC.

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: INC.A.13795

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR WAYLAND G SLABACH

Mailing Address 830 4TH AVE

City

WINDOM

State

KS

Zip Code

67491

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13782

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MS PHYLLIS E SMITH

Mailing Address 5297 GROVE CT

City

MORROW

State

GA

Zip Code

30260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13671

Amount of Each Receipt this Period

500.00

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

1300.00

**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 33 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR CARSON A SPEAR, SR

Mailing Address 2325 BERNICE RD

City

LANSING

State

IL

Zip Code

60438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13753

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MRS MARTHA H TURNEY

Mailing Address 1361 E BOOT RD # 265

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.08

Date of Receipt

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

Transaction ID: INC.A.13635

Amount of Each Receipt this Period

102.08

**C.**

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. NAVYOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13673

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

327.08

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 34 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Larry Youngblood

Mailing Address Po Box 115

City

Chandler

State

TX

Zip Code

75758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Service TechOccupation  
Phoenix

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.14079

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

DR FRANCES BAUER

Mailing Address 200 E END AVE APT 3C

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13601

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

DR FRANCES BAUER

Mailing Address 200 E END AVE APT 3C

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13602

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

335.00

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 35 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS VIOLA V DEMAN

Mailing Address 63 VERNIER RD

City

GROSSE POINTE

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: INC.A.13730

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

REV DON DERIVAUX

Mailing Address 2440 BALLGROUND RD

City

VICKSBURG

State

MS

Zip Code

39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13697

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

MS MARGARET-MARY HASSELBERG

Mailing Address 8538 98TH ST

City

WOODHAVEN

State

NY

Zip Code

11421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

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

Transaction ID: INC.A.13617

Amount of Each Receipt this Period

150.00

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

240.00

**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 36 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ELLEN P HOAG

Mailing Address 728 NORRISTOWN RD APT C110

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: INC.A.13631

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MR H FOLLETT HODGKINS, JR

Mailing Address 7024 PELICAN BAY BLVD  
CALAIS F 403

City

NAPLES

State

FL

Zip Code

34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.08

Date of Receipt

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

Transaction ID: INC.A.13687

Amount of Each Receipt this Period

202.08

**C.**

Full Name (Last, First, Middle Initial)

MR JOSEPH A MC CARTER

Mailing Address 3256 HILDALE AVE

City

OROVILLE

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.P.S & BUTTE COUNTY

Occupation

RETIRED POSTAL CLERK/CLERK

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13892

Amount of Each Receipt this Period

100.00

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

602.08

**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 37 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ALEXANDRA MKITARIAN

Mailing Address 3013 VIA VICTORIA

City

PALOS VERDES ESTAT

State

CA

Zip Code

90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: INC.A.13872

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MR WILLIAM J MYHRE

Mailing Address 865 2ND AVE

City

SWEET HOME

State

OR

Zip Code

97386

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

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

Transaction ID: INC.A.13901

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM J MYHRE

Mailing Address 865 2ND AVE

City

SWEET HOME

State

OR

Zip Code

97386

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

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

Transaction ID: INC.A.13902

Amount of Each Receipt this Period

100.00

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

1600.00

**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 38 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS HILDA JUNE PIANTA

Mailing Address 150 OCEAN DR APT 2B

City

BATON ROUGE

State

LA

Zip Code

70806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13792

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE L RAWLS

Mailing Address 1715 BELLEVUE AVE APT B327

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: INC.A.13649

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS GLADYS B THOMEY

Mailing Address 406 ATWATER ST

City

BURLINGTON

State

NC

Zip Code

27215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13653

Amount of Each Receipt this Period

40.00

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

340.00

**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 39 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ELOISE R VALINET

Mailing Address 5300 W 96TH ST

City

INDIANAPOLIS

State

IN

Zip Code

46268

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDIANAPOLIS LIFE INSURAN-  
CE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: INC.A.13725

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City

Tulsa

State

OK

Zip Code

74105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14513

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City

Tulsa

State

OK

Zip Code

74105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14516

Amount of Each Receipt this Period

20.00

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

340.00

**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 40 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City State Zip Code  
Tulsa OK 74105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14514

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City State Zip Code  
Tulsa OK 74105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14515

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City State Zip Code  
LENA IL 61048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13761

Amount of Each Receipt this Period

100.00

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

140.00

**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 41 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR F PEARCE BRADBURN

Mailing Address 3340 S FORK RD

City

GLASGOW

State

KY

Zip Code

42141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13706

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MS LEVONNE G BREEDEN

Mailing Address 3005 MAZANEC RD

City

WACO

State

TX

Zip Code

76705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

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

Transaction ID: INC.A.13804

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

MRS SHIRLEY R COMON

Mailing Address 457 CALLE MAYOR

City

REDONDO BEACH

State

CA

Zip Code

90277

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAUL'S PHOTO, INC.

Occupation  
SELF-EMPLOYED BOOKKEEPER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

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

Transaction ID: INC.A.13874

Amount of Each Receipt this Period

500.00

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

2250.00

**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 42 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR ROLAND DAHMES

Mailing Address 1100 1ST AVE S APT 205

City

SLEEPY EYE

State

MN

Zip Code

56085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID: INC.A.13738

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

SMSGT EDWARD J GERIK

Mailing Address 8026 CAMPFIRE LN

City

SAN ANTONIO

State

TX

Zip Code

78227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F./U.S.ARMY/CIVIL  
SERVICE

Occupation  
RETIRED SCIENTIST/CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

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

Transaction ID: INC.A.13811

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MYRL GOOD

Mailing Address 2707 CORONADO DR

City

ROSWELL

State

NM

Zip Code

88201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: INC.A.13855

Amount of Each Receipt this Period

500.00

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

800.00

**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 43 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS WINIFRED F HOOD

Mailing Address 1802 WILDFLOWER DR

City

MEDFORD

State

OR

Zip Code

97504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: INC.A.13908

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MRS TERRI S MERSEREAU

Mailing Address 961 LITTLE BEACH DR  
PO BOX 2727

City

GEARHART

State

OR

Zip Code

97138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: INC.A.13899

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MR JAMES L PARKS

Mailing Address PO BOX 30240

City

EDMOND

State

OK

Zip Code

73003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: INC.A.13796

Amount of Each Receipt this Period

500.00

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS NEATHA O PURTELL

Mailing Address 4 CENTRAL ST APT 4

City

RANDOLPH

State

VT

Zip Code

5060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13587

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

LCDR WILLIAM L ROBERTS, RET

Mailing Address 1161 HALL MOUNTAIN RD

City

VIPER

State

KY

Zip Code

41774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.R.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

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

Transaction ID: INC.A.13701

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

LCDR WILLIAM L ROBERTS, RET

Mailing Address 1161 HALL MOUNTAIN RD

City

VIPER

State

KY

Zip Code

41774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.R.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

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

Transaction ID: INC.A.13702

Amount of Each Receipt this Period

100.00

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

230.00

**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 45 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS LOUISE M RUCKER

Mailing Address 3712 HEATH ST

City

GREENSBORO

State

NC

Zip Code

27401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.50

Date of Receipt

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

Transaction ID: INC.A.13659

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MS LOUISE M RUCKER

Mailing Address 3712 HEATH ST

City

GREENSBORO

State

NC

Zip Code

27401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.50

Date of Receipt

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

Transaction ID: INC.A.13658

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

MR CHARLES G SCHAPPERT

Mailing Address PO BOX 479

City

PAULSBORO

State

NJ

Zip Code

8066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HPS, INC.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: INC.A.13596

Amount of Each Receipt this Period

1000.00

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

1125.00

**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 46 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS JOHN B STRASENBURGH

Mailing Address PO BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

8230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13597

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS MARTHA SUMMERS

Mailing Address 3177 S GRANT ST

City

ENGLEWOOD

State

CO

Zip Code

80113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

997.00

Date of Receipt

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

Transaction ID: INC.A.13826

Amount of Each Receipt this Period

320.00

**C.**

Full Name (Last, First, Middle Initial)

MS BEULAH ARNOLD

Mailing Address 614 LEBANON AVE

City

CAMPBELLSVILLE

State

KY

Zip Code

42718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13708

Amount of Each Receipt this Period

100.00

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

520.00

**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 47 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS BEULAH ARNOLD

Mailing Address 614 LEBANON AVE

City State Zip Code  
CAMPBELLSVILLE KY 42718

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13709

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ANTONIO C ESTEVE

Mailing Address 161 S OLD ALICE RD

City State Zip Code  
BROWNSVILLE TX 78520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: INC.A.13817

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
MS FLORENCE I FOLAND

Mailing Address 4239 CRESTON CT

City State Zip Code  
NOBLESVILLE IN 46062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: INC.A.13723

Amount of Each Receipt this Period

200.00

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

750.00

**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 48 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS FLORENCE I FOLAND

Mailing Address 4239 CRESTON CT

City

NOBLESVILLE

State

IN

Zip Code

46062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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 3 / 2 0 0 8

Transaction ID: INC.A.13724

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR D ALLAN GAVAN

Mailing Address PO BOX 971

City

CENTER HARBOR

State

NH

Zip Code

3226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.00

Date of Receipt

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

Transaction ID: INC.A.13585

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: INC.A.13717

Amount of Each Receipt this Period

100.00

**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 49 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

SGT BILLY W GRIMES, RET

Mailing Address 4146 FURMAN DR # B

City

MOBILE

State

AL

Zip Code

36619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALAGANEY TECH

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.13693

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS MARGARET-MARY HASSELBERG

Mailing Address 8538 98TH ST

City

WOODHAVEN

State

NY

Zip Code

11421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

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

Transaction ID: INC.A.13618

Amount of Each Receipt this Period

80.00

**C.**

Full Name (Last, First, Middle Initial)

Andreas V Jensen

Mailing Address 3481 N CNTRY CLB VST PLACE  
TUCSON

City

AZ

State

85

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.14001

Amount of Each Receipt this Period

35.00

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

215.00

**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 50 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARY F JOINER

Mailing Address 2507 RUSSELL PKWY

City

GREAT BEND

State

KS

Zip Code

67530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.08

Date of Receipt

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

Transaction ID: INC.A.13783

Amount of Each Receipt this Period

120.08

**B.**

Full Name (Last, First, Middle Initial)

MR GUY T MCBRIDE, JR

Mailing Address 2615 OAK DR UNIT 13

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13828

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MRS CARROL NEWELL

Mailing Address 322 SE 100TH AVE

City

STAFFORD

State

KS

Zip Code

67578

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 ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13785

Amount of Each Receipt this Period

500.00

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

1120.08

**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 51 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS PEGGY J RECTOR

Mailing Address 259 CREST ST

City State Zip Code  
RANGELY CO 81648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13839

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR PHILLIP A SHELSTAD

Mailing Address 1075 VERDE VALLEY SCHOOL RD

City State Zip Code  
SEDONA AZ 86351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: INC.A.13852

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
MR KLAUS W BECKMANN

Mailing Address PO BOX 167

City State Zip Code  
AMSTERDAM NY 12010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CHEMICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: INC.A.13620

Amount of Each Receipt this Period

1000.00

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

1500.00

**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 52 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR F PEARCE BRADBURN

Mailing Address 3340 S FORK RD

City

GLASGOW

State

KY

Zip Code

42141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13707

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: INC.A.13766

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: INC.A.13768

Amount of Each Receipt this Period

300.00

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

900.00

**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 53 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: INC.A.13765

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: INC.A.13767

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR DONALD E BURNEY

Mailing Address 535 W OGDEN AVE # 228

City

NAPERVILLE

State

IL

Zip Code

60563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13758

Amount of Each Receipt this Period

100.00

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

500.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN C CLEGG

Mailing Address 1785 N 1500 E

City

PROVO

State

UT

Zip Code

84604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.13845

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN C CLEGG

Mailing Address 1785 N 1500 E

City

PROVO

State

UT

Zip Code

84604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.13846

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT W CORNELL

Mailing Address 80 LOEFFLER RD APT G # 404C

City

BLOOMFIELD

State

CT

Zip Code

6002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13590

Amount of Each Receipt this Period

100.00

**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 55 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR FRANK CUSUMANO

Mailing Address 2009 N COMMERCE ST

City

STOCKTON

State

CA

Zip Code

95204

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 ▼

3510.00

Date of Receipt

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

Transaction ID: INC.A.13887

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

MR JAMES B DOWNEY

Mailing Address 26000 NEWBRIDGE DR

City

LOS ALTOS

State

CA

Zip Code

94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: INC.A.13880

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MS AVIS C ELMS

Mailing Address 305 HAMILTON RD

City

PEKIN

State

IL

Zip Code

61554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13764

Amount of Each Receipt this Period

300.00

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

1310.00

**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 56 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

DR FRANK G FIELDER

Mailing Address 2384 COUNTY ROAD 10

City

ALPINE

State

NY

Zip Code

14805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

RETIRED VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13624

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: INC.A.13718

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

SMSGT EDWARD J GERIK

Mailing Address 8026 CAMPFIRE LN

City

SAN ANTONIO

State

TX

Zip Code

78227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F./U.S.ARMY/CIVIL  
SERVICE

Occupation

RETIRED SCIENTIST/CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

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

Transaction ID: INC.A.13812

Amount of Each Receipt this Period

200.00

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

1300.00

**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 57 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS HELEN B HALPERN

Mailing Address 4027 FAIRFAX RD

City

EVANSVILLE

State

IN

Zip Code

47710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: INC.A.13728

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN F JOPLIN

Mailing Address 150 GESSNER RD PH 1

City

HOUSTON

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: INC.A.13807

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR DONALD E KELLEY

Mailing Address 221 E ROCKWOOD BLVD APT 320

City

SPOKANE

State

WA

Zip Code

99202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

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

Transaction ID: INC.A.13927

Amount of Each Receipt this Period

1000.00

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

1650.00

**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 58 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GLORIA V KELLEY

Mailing Address 221 E ROCKWOOD BLVD APT 320

City

SPOKANE

State

WA

Zip Code

99202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: INC.A.13929

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR WALTER H KLEINER

Mailing Address 1725 89TH PL NE

City

BELLEVUE

State

WA

Zip Code

98004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

RETIRED FARMING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: INC.A.13909

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR GEORGE C KUNKEL

Mailing Address 9552 HIGHEDGE DR

City

DALLAS

State

TX

Zip Code

75238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNT PETROLEUM CORP.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13800

Amount of Each Receipt this Period

100.00

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

800.00

**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 59 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ELIZABETH M MC LEAN

Mailing Address 106 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13667

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR HAROLD R MORFORD

Mailing Address 3419 FRONTIER ST

City

CHEYENNE

State

WY

Zip Code

82001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13840

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

ARMAND MORGANTE

Mailing Address 618 ORANGE AVE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

REITRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13679

Amount of Each Receipt this Period

100.00

**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 60 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS ROBERTA L PATTERSON

Mailing Address 19 ELIZABETH CIR

City

GREENBRAE

State

CA

Zip Code

94904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13885

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MRS HILDA JUNE PIANTA

Mailing Address 150 OCEAN DR APT 2B

City

BATON ROUGE

State

LA

Zip Code

70806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13793

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

LCDR WILLIAM L ROBERTS, RET

Mailing Address 1161 HALL MOUNTAIN RD

City

VIPER

State

KY

Zip Code

41774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.R.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

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

Transaction ID: INC.A.13703

Amount of Each Receipt this Period

105.00

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

505.00

**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 61 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR LEE R RODGERS

Mailing Address 615 HIGHLAND AVE

City

NEWTON

State

KS

Zip Code

67114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: INC.A.13779

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR PHILIP W SCHAEFFING

Mailing Address 3717 WATT RD

City

GAHANNA

State

OH

Zip Code

43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

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

Transaction ID: INC.A.13711

Amount of Each Receipt this Period

112.00

**C.**

Full Name (Last, First, Middle Initial)

MR HARRY W SHADE

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: INC.A.13830

Amount of Each Receipt this Period

50.00

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

362.00

**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 62 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR CARSON A SPEAR, SR

Mailing Address 2325 BERNICE RD

City

LANSING

State

IL

Zip Code

60438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13754

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MS GLORIA M STEVENS

Mailing Address 3091 HIGHLANDS BRIDGE RD

City

SARASOTA

State

FL

Zip Code

34235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13688

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

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

Transaction ID: INC.A.13856

Amount of Each Receipt this Period

100.00

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GRACE E WILSON

Mailing Address 1622 POLAR DR

City

WENTZVILLE

State

MO

Zip Code

63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

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

Transaction ID: INC.A.13771

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Pamela Borden

Mailing Address 10677 Brooks Street

City

Indianapolis

State

IN

Zip Code

46234

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Technology Project Manager

Occupation

Trasys LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: INC.A.14109

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Hughes

Mailing Address 120 East De La Guerra Street

City

Santa Barbara

State

CA

Zip Code

93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Investment Banker

Occupation

Commerce Capital Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: INC.A.14227

Amount of Each Receipt this Period

40.00

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

290.00

**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 64 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Kathleen Keith

Mailing Address 137 Rametto Rd.  
Santa Barbara

City State Zip Code  
CA 93

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: INC.A.14241

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Kenneth Lyons

Mailing Address 448 Gibbs Avenue #1  
Newport

City State Zip Code  
RI 02

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: INC.A.14280

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MR GORDON W BAILEY

Mailing Address 7540 OGELSBY AVE

City State Zip Code  
LOS ANGELES CA 90045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13867

Amount of Each Receipt this Period

100.00

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

140.00

**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 65 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS HILDEGARD BANDY

Mailing Address 1539 GRAND AVE

City

MEDFORD

State

OR

Zip Code

97504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13905

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MRS HILDEGARD BANDY

Mailing Address 1539 GRAND AVE

City

MEDFORD

State

OR

Zip Code

97504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13906

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS VIRGINIA H BARNES

Mailing Address 101 COUNTRY COVE DR

City

CLINTON

State

MS

Zip Code

39056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. TREASURY/ATF JACKSON  
DISTRICT

Occupation

RETIRED/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1251.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13696

Amount of Each Receipt this Period

300.00

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

475.00

**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 66 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

DR FRANCES BAUER

Mailing Address 200 E END AVE APT 3C

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13603

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DR FRANCES BAUER

Mailing Address 200 E END AVE APT 3C

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13604

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City

LENA

State

IL

Zip Code

61048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13762

Amount of Each Receipt this Period

100.00

**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 67 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS ELIZABETH P BERGBOWER

Mailing Address 102 GLENMOOR CIR S

City

EASTON

State

PA

Zip Code

18045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED AIRLINES

Occupation

RETIRED AIRLINE STEWARDESS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13629

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR RICHARD H BRICKMAN

Mailing Address 720 SOUTHLAWN TER

City

OELWEIN

State

IA

Zip Code

50662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

FARMER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13733

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Jack A Buzbee

Mailing Address 200 E Douglas St  
De Soto

City

IL

State

62

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.14127

Amount of Each Receipt this Period

50.00

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

600.00

**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 68 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR NEAL CHASTAIN

Mailing Address 7608 UTICA AVE

City

LUBBOCK

State

TX

Zip Code

79424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13823

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

DR NATHAN PIERCE COUCH

Mailing Address 5 HIGH ROCK RD

City

DOVER

State

MA

Zip Code

2030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13576

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROLAND DAHMES

Mailing Address 1100 1ST AVE S APT 205

City

SLEEPY EYE

State

MN

Zip Code

56085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13739

Amount of Each Receipt this Period

30.00

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

255.00

**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 69 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

REV DON DERIVAUX

Mailing Address 2440 BALLGROUND RD

City

VICKSBURG

State

MS

Zip Code

39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13698

Amount of Each Receipt this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)

Donna Digman

Mailing Address 2324-G S. Vineyard Ave

City

Ontario

State

CA

Zip Code

91761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Manager

Occupation

Phillips Carbide Industries

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13969

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MISS RUTH A FERNANDES

Mailing Address 1717 NORFOLK AVE APT 1219

City

LUBBOCK

State

TX

Zip Code

79416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13819

Amount of Each Receipt this Period

300.00

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

390.00

**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 70 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR DAN L FISH

Mailing Address 8211 8TH AVE NW

City

SEATTLE

State

WA

Zip Code

98117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13915

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

SMSGT EDWARD J GERIK

Mailing Address 8026 CAMPFIRE LN

City

SAN ANTONIO

State

TX

Zip Code

78227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F./U.S.ARMY/CIVIL  
SERVICE

Occupation

RETIRED SCIENTIST/CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13813

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

CAMERON D GLIDEWELL

Mailing Address 1227 LE GRAY AVE

City

LOS ANGELES

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DISNEY

Occupation

TELEVISION ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13862

Amount of Each Receipt this Period

200.00

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

600.00

**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 71 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

CAMERON D GLIDEWELL

Mailing Address 1227 LE GRAY AVE

City

LOS ANGELES

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DISNEY

Occupation

TELEVISION ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13861

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR WILLIAM J HARDING, SR

Mailing Address 26 HUNNEWELL AVE

City

ELMONT

State

NY

Zip Code

11003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13610

Amount of Each Receipt this Period

2.00

**C.**

Full Name (Last, First, Middle Initial)

MR EUGENE J IDONE

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13613

Amount of Each Receipt this Period

300.00

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

502.00

**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 72 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR VICTOR JOHN JAWORSKY

Mailing Address PO BOX 196

City

ORANGEBURG

State

NY

Zip Code

10962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13607

Amount of Each Receipt this Period

102.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Johnson

Mailing Address 45 Ridgewood Circle

City

Wilmington

State

DE

Zip Code

19809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Contractor

Occupation  
Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.14003

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR GEORGE C KUNKEL

Mailing Address 9552 HIGHEDGE DR

City

DALLAS

State

TX

Zip Code

75238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNT PETROLEUM CORP.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13801

Amount of Each Receipt this Period

100.00

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

252.00

**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 73 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS REBEKAH J LAW

Mailing Address 6922 GREAT OAKS RD

City State Zip Code  
GERMANTOWN TN 38138

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13695

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City State Zip Code  
BREMERTON WA 98312

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13916

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS GRACE MARSHMAN

Mailing Address 39 PALSA AVE

City State Zip Code  
ELMWOOD PARK NJ 7407

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13592

Amount of Each Receipt this Period

100.00

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

750.00

**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 74 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Steven Mcarthur

Mailing Address 6387 Nw 23rd Ct  
Boca Raton

City State Zip Code  
FL 33

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.14293

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR HAROLD R MORFORD

Mailing Address 3419 FRONTIER ST

City State Zip Code  
CHEYENNE WY 82001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13841

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT J OLSON

Mailing Address 4249 COUNTY ROAD 309A

City State Zip Code  
IGNACIO CO 81137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13836

Amount of Each Receipt this Period

300.00

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

700.00

**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 75 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13744

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS JEANNETTE A REMMEL

Mailing Address 620 SAND HILL RD  
APT 201 B

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13884

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

LCDR WILLIAM L ROBERTS, RET

Mailing Address 1161 HALL MOUNTAIN RD

City

VIPER

State

KY

Zip Code

41774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.R.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13704

Amount of Each Receipt this Period

20.00

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

620.00

**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 76 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR LEE R RODGERS

Mailing Address 615 HIGHLAND AVE

City

NEWTON

State

KS

Zip Code

67114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13780

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

MR PHILIP W SCHAEFFING

Mailing Address 3717 WATT RD

City

GAHANNA

State

OH

Zip Code

43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13712

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MS JANET E SCHRODER

Mailing Address 75450 ROAD 330

City

GRANT

State

NE

Zip Code

69140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13790

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

650.00

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 77 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR W LEONARD SEELEY

Mailing Address 10351 KENWOOD DR

City

GRASS VALLEY

State

CA

Zip Code

95949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13891

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR HARRY W SHADE

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13831

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MS ALVINA M SORSBY

Mailing Address 4177 RIDGEWAY PL

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13923

Amount of Each Receipt this Period

200.00

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

350.00

**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 78 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR WILLIAM M STEWART

Mailing Address 811 MORNINGSIDE DR

City

FULLERTON

State

CA

Zip Code

92835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13879

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13857

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS GLADYS B THOMEY

Mailing Address 406 ATWATER ST

City

BURLINGTON

State

NC

Zip Code

27215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13654

Amount of Each Receipt this Period

40.00

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

540.00

**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 79 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS ADELAIDE TONG

Mailing Address 1482 CLAY ST

City State Zip Code  
SAN FRANCISCO CA 94109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13881

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MS HELENE J WALKER

Mailing Address 23871 WILLOWS DR APT 256

City State Zip Code  
LAGUNA HILLS CA 92653

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3801.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13877

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City State Zip Code  
MELBOURNE FL 32940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
U.S. NAVY

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13674

Amount of Each Receipt this Period

100.00

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

700.00

**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 80 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR WILLIAM R WILSON

Mailing Address 1853 PAGE PL

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: INC.A.13633

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

William Carluccio

Mailing Address 1463 Central Ave.

City

Westfield

State

NJ

Zip Code

07090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Warehouse Attendant

Occupation  
Ford Motor Company

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 8 / 2 0 0 8

Transaction ID: INC.A.14130

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Randy Crawford

Mailing Address 6100 Shenandoah Ave

City

Los Angeles

State

CA

Zip Code

90056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

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

Transaction ID: INC.A.14144

Amount of Each Receipt this Period

1000.00

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

1200.00

**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 81 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARGARET B DAVIDSON

Mailing Address 611 N ALPINE DR

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

INVESTMENTS/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13870

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Lori Eubanks

Mailing Address 23 Thorncreek Ct.

City

The Woodlands

State

TX

Zip Code

77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker & Volunteer

Occupation

Homemaker

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 / 2 8 / 2 0 0 8

Transaction ID: INC.A.14175

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

SMSGT EDWARD J GERIK

Mailing Address 8026 CAMPFIRE LN

City

SAN ANTONIO

State

TX

Zip Code

78227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F./U.S.ARMY/CIVIL  
SERVICE

Occupation

RETIRED SCIENTIST/CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

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

Transaction ID: INC.A.13814

Amount of Each Receipt this Period

25.00

**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 82 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS HELEN B HALPERN

Mailing Address 4027 FAIRFAX RD

City

EVANSVILLE

State

IN

Zip Code

47710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: INC.A.13729

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR WILLIAM J HARDING, SR

Mailing Address 26 HUNNEWELL AVE

City

ELMONT

State

NY

Zip Code

11003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

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

Transaction ID: INC.A.13611

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR DONALD R JONES

Mailing Address 9 1/2 TROTTERS LN

City

NANTUCKET

State

MA

Zip Code

2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WOODS HOLE STEAMSHIP AUTH-  
ORITY

Occupation  
RETIRED TERMINAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

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

Transaction ID: INC.A.13583

Amount of Each Receipt this Period

200.00

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

600.00

**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 83 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: INC.A.13797

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR WALTER H KLEINER

Mailing Address 1725 89TH PL NE

City

BELLEVUE

State

WA

Zip Code

98004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETIRED FARMING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: INC.A.13910

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR JOSEPH A MC CARTER

Mailing Address 3256 HILDALE AVE

City

OROVILLE

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.P.S & BUTTE COUNTY

Occupation  
RETIRED POSTAL CLERK/CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13894

Amount of Each Receipt this Period

200.00

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

600.00

**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 84 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JOSEPH A MC CARTER

Mailing Address 3256 HILDALE AVE

City

OROVILLE

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.P.S & BUTTE COUNTY

Occupation

RETIRED POSTAL CLERK/CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13893

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT J OLSON

Mailing Address 4249 COUNTY ROAD 309A

City

IGNACIO

State

CO

Zip Code

81137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13837

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MR FORREST E OTT

Mailing Address 107 FRONTAGE RD

City

SUMMERVILLE

State

SC

Zip Code

29485

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F.

Occupation

RETIRED LT COL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: INC.A.13661

Amount of Each Receipt this Period

150.00

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

550.00

**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 85 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13745

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS GLORIA M STEVENS

Mailing Address 3091 HIGHLANDS BRIDGE RD

City

SARASOTA

State

FL

Zip Code

34235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13689

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

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

Transaction ID: INC.A.13858

Amount of Each Receipt this Period

100.00

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

400.00

**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 86 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARTHA H TURNEY

Mailing Address 1361 E BOOT RD # 265

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.08

Date of Receipt

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

Transaction ID: INC.A.13636

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS JEANNE C WATSON

Mailing Address 2016 TRIXIE LN

City

HOUSTON

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.08

Date of Receipt

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

Transaction ID: INC.A.13808

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS GRACE E WILSON

Mailing Address 1622 POLAR DR

City

WENTZVILLE

State

MO

Zip Code

63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

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

Transaction ID: INC.A.13772

Amount of Each Receipt this Period

200.00

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

400.00

**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 87 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Eugene Ancel

Mailing Address 9599 Lake Douglas Pl  
Orlando

City State Zip Code  
FL 32

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired

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 / 2 9 / 2 0 0 8

Transaction ID: INC.A.13934

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Gail Brown

Mailing Address 4505 California Ave Unit 205

City State Zip Code  
Long Beach CA 90807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rn

Occupation  
Long Beach Memorial Medical Center

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.14118

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Anne M Erskine

Mailing Address 41 Sullivan Chase Drive  
Avondale

City State Zip Code  
PA 19

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.13973

Amount of Each Receipt this Period

25.00

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

100.00

**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 88 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Louise Garcia

Mailing Address 607 S. Friendswood

City

Friendswood

State

TX

Zip Code

77546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Curves For Women

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.13981

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Lowell Hedges

Mailing Address 3960 Larue Prospect Rd S

City

Prospect

State

OH

Zip Code

43342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.13995

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MR EUGENE J IDONE

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.13614

Amount of Each Receipt this Period

300.00

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

360.00

**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 89 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Kathy Johnson

Mailing Address 827 Country Lane

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: INC.A.14238

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR GEORGE M NEALL, II

Mailing Address 5452 TATES BANK RD

City

CAMBRIDGE

State

MD

Zip Code

21613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: INC.A.13647

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Malcolm Orr

Mailing Address 10610 Benchmark Way

City

San Antonio

State

TX

Zip Code

78213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PhysicianOccupation  
University Of Texas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: INC.A.15080

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1500.00

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 90 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ALICE E SUMIDA

Mailing Address 2309 SW 1ST AVE APT 1545

City

PORTLAND

State

OR

Zip Code

97201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.13900

Amount of Each Receipt this Period

897.00

**B.**

Full Name (Last, First, Middle Initial)

Cynthia Yetnikoff

Mailing Address 9019 Norma Place  
West Hollywood

City

CA

State

90

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: INC.A.14437

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MR NEAL CHASTAIN

Mailing Address 7608 UTICA AVE

City

LUBBOCK

State

TX

Zip Code

79424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: INC.A.13824

Amount of Each Receipt this Period

75.00

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

997.00

**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 91 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Roberet Fehmel

Mailing Address 357 Woodland Court  
Coram

City State Zip Code  
NY 11

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: INC.A.13975

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR D ALLAN GAVAN

Mailing Address PO BOX 971

City State Zip Code  
CENTER HARBOR NH 3226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.00

Date of Receipt

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

Transaction ID: INC.A.13586

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City State Zip Code  
CINCINNATI OH 45243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: INC.A.13719

Amount of Each Receipt this Period

100.00

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

225.00

**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 92 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR PHILIP O GEIER, JR

Mailing Address 6000 REDBIRD HOLLOW LN

City

CINCINNATI

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: INC.A.13720

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Roy Henry

Mailing Address 1372 Parkview Estates Dr.

City

Ellisville

State

MO

Zip Code

63021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Former Financial Planner

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

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

Transaction ID: INC.A.13997

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MRS BARBARA A JARVIS

Mailing Address PO BOX 85

City

ZAVALLA

State

TX

Zip Code

75980

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13802

Amount of Each Receipt this Period

500.00

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

625.00

**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 93 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MRS EILEEN KELLEY

Mailing Address 1201 N WARREN AVE

City State Zip Code  
OKLAHOMA CITY OK 73107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: INC.A.13798

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
MR HOMER R KNIGHT

Mailing Address 305 S SPRUCE ST

City State Zip Code  
CONWAY MO 65632

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DODAEROSPACE CENTER

Occupation  
RETIRED/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13778

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Len Long

Mailing Address 1104longviewdr  
Nb

City State Zip Code  
NC 28

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
ret

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

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

Transaction ID: INC.A.14274

Amount of Each Receipt this Period

50.00

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

550.00

**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 94 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE L RAWLS

Mailing Address 1715 BELLEVUE AVE APT B327

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: INC.A.13650

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Gilia Rethman

Mailing Address 47-140 Heno Place

City

Kaneohe

State

HI

Zip Code

96744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation  
Self

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 / 3 0 / 2 0 0 8

Transaction ID: INC.A.14041

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

MR Z K STRZALKOWSKI

Mailing Address 6 DANDELION DR

City

BOILING SPRINGS

State

PA

Zip Code

17007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.

Occupation  
RETIRED CONTRACT SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: INC.A.13625

Amount of Each Receipt this Period

500.00

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

635.00

**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 95 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GLADYS B THOMEY

Mailing Address 406 ATWATER ST

City

BURLINGTON

State

NC

Zip Code

27215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13655

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

MR RICHARD H BRICKMAN

Mailing Address 720 SOUTHLAWN TER

City

OELWEIN

State

IA

Zip Code

50662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13734

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR EUGENE J IDONE

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

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

Transaction ID: INC.A.13615

Amount of Each Receipt this Period

250.00

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

410.00

**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 96 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR ARNO G KALB

Mailing Address 5080 SE HANSON CIR

City

STUART

State

FL

Zip Code

34997

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.00

Date of Receipt

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

Transaction ID: INC.A.13690

Amount of Each Receipt this Period

203.00

**B.**

Full Name (Last, First, Middle Initial)

MS DORA Y KUNISHIGE

Mailing Address 1117 W 122ND ST

City

LOS ANGELES

State

CA

Zip Code

90044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

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

Transaction ID: INC.A.13865

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

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

Transaction ID: INC.A.13917

Amount of Each Receipt this Period

100.00

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

503.00

**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 97 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MISS DOROTHY M LINCOLN

Mailing Address 7026 COUNTY ROAD 12

City State Zip Code  
NAPLES NY 14512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.71

Date of Receipt

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

Transaction ID: INC.A.13623

Amount of Each Receipt this Period

153.45

**B.**

Full Name (Last, First, Middle Initial)  
Cecil Meadows

Mailing Address 930 Koae St  
Honolulu

City State Zip Code  
HI 96

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Former Electronics Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: INC.A.14018

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR HAROLD R MORFORD

Mailing Address 3419 FRONTIER ST

City State Zip Code  
CHEYENNE WY 82001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13842

Amount of Each Receipt this Period

100.00

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

303.45

**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 98 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR HUBERT E SHADRICK

Mailing Address 5821 200TH ST SW APT 127

City

LYNNWOOD

State

WA

Zip Code

98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNOHOMISH COUNTY

Occupation

RETIRED ROAD WORKER-GREASE MONKEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13913

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS GLADYS A WEBER

Mailing Address 204 E SUSQUEHANNA AVE

City

TOWSON

State

MD

Zip Code

21286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

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

Transaction ID: INC.A.13645

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

MRS GRACE E WILSON

Mailing Address 1622 POLAR DR

City

WENTZVILLE

State

MO

Zip Code

63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

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

Transaction ID: INC.A.13773

Amount of Each Receipt this Period

100.00

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

235.00

**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 99 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Robert D Dingeman

Mailing Address 664 Aspen Heights Drive

City

Fairbanks

State

AK

Zip Code

99712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Professional

Occupation  
Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.14161

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Len Long

Mailing Address 1104longviewdr  
Nb

City

NC

State

28

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
ret

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

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

Transaction ID: INC.A.14275

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

David Lyon

Mailing Address 102 Woodside Drive

City

Mechanicsburg

State

PA

Zip Code

17055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Advisor

Occupation  
Ameriprise Financial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14278

Amount of Each Receipt this Period

50.00

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

100.00

**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 100 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City State Zip Code  
Tulsa OK 74105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14517

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Jean Angle

Mailing Address 70 Stratford Road

City State Zip Code  
Eastborough KS 67207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ofc Mgr

Occupation  
Frontier Oil Company

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.14983

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Kenneth Parsons

Mailing Address 3092 Pony Ridge Turn

City State Zip Code  
Dumfries VA 22026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Computer Engineer

Occupation  
Unemployed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14679

Amount of Each Receipt this Period

250.00

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

800.00

**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 101 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Ninette Allen-Maples

Mailing Address 2661 East 33rd Place

City State Zip Code  
Tulsa OK 74105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: INC.A.14518

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DR FRANCES BAUER

Mailing Address 200 E END AVE APT 3C

City State Zip Code  
NEW YORK NY 10128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13605

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MS ELIZABETH P BERGBOWER

Mailing Address 102 GLENMOOR CIR S

City State Zip Code  
EASTON PA 18045

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UNITED AIRLINES

Occupation  
RETIRED AIRLINE STEWARDESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

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

Transaction ID: INC.A.13630

Amount of Each Receipt this Period

500.00

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

600.00

**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 102 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS LEVONNE G BREEDEN

Mailing Address 3005 MAZANEC RD

City State Zip Code  
WACO TX 76705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

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

Transaction ID: INC.A.13805

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR NEAL CHASTAIN

Mailing Address 7608 UTICA AVE

City State Zip Code  
LUBBOCK TX 79424

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: INC.A.13825

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS MARGARET B DAVIDSON

Mailing Address 611 N ALPINE DR

City State Zip Code  
BEVERLY HILLS CA 90210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
INVESTMENTS/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13871

Amount of Each Receipt this Period

100.00

**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 103 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MRS MARY EARLE DRAWDY

Mailing Address 645 PIEDMONT GOLF COURSE RD

City State Zip Code  
 PIEDMONT SC 29673

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 ▼

325.00

Date of Receipt

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

Transaction ID: INC.A.13664

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MS KATHLEEN D FABIANO

Mailing Address 10214 AVALON DR UNIT 10214

City State Zip Code  
 WEYMOUTH MA 2188

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: INC.A.13580

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
SGT BILLY W GRIMES, RET

Mailing Address 4146 FURMAN DR # B

City State Zip Code  
 MOBILE AL 36619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ALAGANEY TECH

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.13694

Amount of Each Receipt this Period

100.00

**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 104 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

DR ALBERT C HEINLEIN

Mailing Address 1237 CHELTON DR

City

KENT

State

OH

Zip Code

44240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KENT STATE UNIVERSITY

Occupation

RETIRED PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: INC.A.13713

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN E HENDRICKSON

Mailing Address 26607 HENDRICKSON RD

City

CALUMET

State

MI

Zip Code

49913

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13732

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MRS ELLEN P HOAG

Mailing Address 728 NORRISTOWN RD APT C110

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: INC.A.13632

Amount of Each Receipt this Period

100.00

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

650.00

**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 105 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MRS ANN N HUDSON

Mailing Address 730 LEWISON LN

City State Zip Code  
VIROQUA WI 54665

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
ELEMENTARY SCHOOL TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.00

Date of Receipt

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

Transaction ID: INC.A.13736

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR VICTOR JOHN JAWORSKY

Mailing Address PO BOX 196

City State Zip Code  
ORANGEBURG NY 10962

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

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

Transaction ID: INC.A.13608

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Andreas V Jensen

Mailing Address 3481 N CNTRY CLB VST PLACE  
TUCSON

City State Zip Code  
AZ 85

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
retired chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: INC.A.14002

Amount of Each Receipt this Period

100.00

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

420.00

**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 106 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARY F JOINER

Mailing Address 2507 RUSSELL PKWY

City

GREAT BEND

State

KS

Zip Code

67530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.08

Date of Receipt

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

Transaction ID: INC.A.13784

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR DONALD R JONES

Mailing Address 9 1/2 TROTTERS LN

City

NANTUCKET

State

MA

Zip Code

2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WOODS HOLE STEAMSHIP AUTH-  
ORITY

Occupation

RETIRED TERMINAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

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

Transaction ID: INC.A.13584

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR ARNO G KALB

Mailing Address 5080 SE HANSON CIR

City

STUART

State

FL

Zip Code

34997

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.00

Date of Receipt

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

Transaction ID: INC.A.13691

Amount of Each Receipt this Period

250.00

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

950.00

**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 107 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS SHIRLEY S KLEIN

Mailing Address 2101 ROCK SPRING RD

City

FOREST HILL

State

MD

Zip Code

21050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

MERCHANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

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

Transaction ID: INC.A.13642

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

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

Transaction ID: INC.A.13919

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

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

Transaction ID: INC.A.13918

Amount of Each Receipt this Period

50.00

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

350.00

**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 108 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JOSEPH A MC CARTER

Mailing Address 3256 HILDALE AVE

City

OROVILLE

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.P.S & BUTTE COUNTY

Occupation

RETIRED POSTAL CLERK/CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13895

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ELIZABETH M MC LEAN

Mailing Address 106 SHORELINE DR

City

HILTON HEAD ISLAND

State

SC

Zip Code

29928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13668

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS JEANETTE M MICHAEL

Mailing Address 627 S ADDISON AVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL HARVESTER(N-  
AVISTAR)

Occupation

RETIRED CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13751

Amount of Each Receipt this Period

100.00

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 109 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR HAROLD R MORFORD

Mailing Address 3419 FRONTIER ST

City

CHEYENNE

State

WY

Zip Code

82001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13843

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

ARMAND MORGANTE

Mailing Address 618 ORANGE AVE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13680

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM J MYHRE

Mailing Address 865 2ND AVE

City

SWEET HOME

State

OR

Zip Code

97386

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

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

Transaction ID: INC.A.13903

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

350.00

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 110 / 181

(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)

National Campaign Fund

**A.**Full Name (Last, First, Middle Initial)  
MR VERNON M NEFF

Mailing Address PO BOX 426

City	State	Zip Code
LAKIN	KS	67860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13787

Amount of Each Receipt this Period

100.00

**B.**Full Name (Last, First, Middle Initial)  
MR FORREST E OTT

Mailing Address 107 FRONTAGE RD

City	State	Zip Code
SUMMERVILLE	SC	29485

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F.Occupation  
RETIRED LT COL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: INC.A.13662

Amount of Each Receipt this Period

200.00

**C.**Full Name (Last, First, Middle Initial)  
MRS MARILYN PAOLICELLI

Mailing Address 1043 SOLDIER HILL RD

City	State	Zip Code
ORADELL	NJ	7649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.13

Date of Receipt

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

Transaction ID: INC.A.13595

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

800.00

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 111 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13746

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE L RAWLS

Mailing Address 1715 BELLEVUE AVE APT B327

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: INC.A.13651

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETIRED SMALL BUSINESS OWNER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3050.00

Date of Receipt

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

Transaction ID: INC.A.13681

Amount of Each Receipt this Period

500.00

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

700.00

**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 112 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR PHILLIP A SHELSTAD

Mailing Address 1075 VERDE VALLEY SCHOOL RD

City

SEDONA

State

AZ

Zip Code

86351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: INC.A.13853

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MS ALVINA M SORSBY

Mailing Address 4177 RIDGEWAY PL

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

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

Transaction ID: INC.A.13924

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR CARSON A SPEAR, SR

Mailing Address 2325 BERNICE RD

City

LANSING

State

IL

Zip Code

60438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13755

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional) .....

755.00

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 113 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GLADYS B THOMEY

Mailing Address 406 ATWATER ST

City

BURLINGTON

State

NC

Zip Code

27215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13656

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MS ADELAIDE TONG

Mailing Address 1482 CLAY ST

City

SAN FRANCISCO

State

CA

Zip Code

94109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13882

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS HELENE J WALKER

Mailing Address 23871 WILLOWS DR APT 256

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3801.00

Date of Receipt

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

Transaction ID: INC.A.13878

Amount of Each Receipt this Period

500.00

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

625.00

**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 114 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS JEANNE C WATSON

Mailing Address 2016 TRIXIE LN

City

HOUSTON

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.08

Date of Receipt

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

Transaction ID: INC.A.13809

Amount of Each Receipt this Period

102.08

**B.**

Full Name (Last, First, Middle Initial)

MS GLADYS A WEBER

Mailing Address 204 E SUSQUEHANNA AVE

City

TOWSON

State

MD

Zip Code

21286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

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

Transaction ID: INC.A.13646

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM R WILSON

Mailing Address 1853 PAGE PL

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13634

Amount of Each Receipt this Period

200.00

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

402.08

**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 115 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City

CINCINNATI

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

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

Transaction ID: INC.A.13715

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Bemis

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13555

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Bob Bunker

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13554

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

650.00

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 116 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS EDNA LEA CHASE

Mailing Address 12 WILLOW CT # E  
LAKEWOOD ESTATES

City State Zip Code  
BRANSON MO 65616

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 ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.13775

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROLAND DAHMES

Mailing Address 1100 1ST AVE S APT 205

City State Zip Code  
SLEEPY EYE MN 56085

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID: INC.A.13740

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
REV DON DERIVAUX

Mailing Address 2440 BALLGROUND RD

City State Zip Code  
VICKSBURG MS 39183

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DIOCESE OF JACKSON

Occupation  
RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.13699

Amount of Each Receipt this Period

50.00

**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 117 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS JOYCE B DOHENY

Mailing Address 4383 ROYAL PL

City

HONOLULU

State

HI

Zip Code

96816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2850.00

Date of Receipt

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

Transaction ID: INC.A.13898

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MISS RUTH A FERNANDES

Mailing Address 1717 NORFOLK AVE APT 1219

City

LUBBOCK

State

TX

Zip Code

79416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

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

Transaction ID: INC.A.13820

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

SMSGT EDWARD J GERIK

Mailing Address 8026 CAMPFIRE LN

City

SAN ANTONIO

State

TX

Zip Code

78227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F./U.S.ARMY/CIVIL  
SERVICE

Occupation

RETIRED SCIENTIST/CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

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

Transaction ID: INC.A.13815

Amount of Each Receipt this Period

50.00

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

1250.00

**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 118 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS LENOLA GRISMORE

Mailing Address 4589 RD O # 8

City

PANDORA

State

OH

Zip Code

45877

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 ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13722

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

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

Transaction ID: INC.A.13920

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS GRACE MARSHMAN

Mailing Address 39 PALSA AVE

City

ELMWOOD PARK

State

NJ

Zip Code

7407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: INC.A.13593

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

225.00

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 119 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR LEE R RODGERS

Mailing Address 615 HIGHLAND AVE

City

NEWTON

State

KS

Zip Code

67114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: INC.A.13781

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

RETIRED SMALL BUSINESS OWNER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3050.00

Date of Receipt

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

Transaction ID: INC.A.13682

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MS JANET E SCHRODER

Mailing Address 75450 ROAD 330

City

GRANT

State

NE

Zip Code

69140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13791

Amount of Each Receipt this Period

180.00

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

1180.00

**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 120 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS ALVINA M SORSBY

Mailing Address 4177 RIDGEWAY PL

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

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

Transaction ID: INC.A.13925

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. NAVY

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13675

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS GRACE E WILSON

Mailing Address 1622 POLAR DR

City

WENTZVILLE

State

MO

Zip Code

63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

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

Transaction ID: INC.A.13774

Amount of Each Receipt this Period

50.00

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

650.00

**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 121 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS EDNA LEA CHASE

Mailing Address 12 WILLOW CT # E

LAKEWOOD ESTATES

City

BRANSON

State

MO

Zip Code

65616

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 ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.13776

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MSGT EDWARD J GERIK

Mailing Address 8026 CAMPFIRE LN

City

SAN ANTONIO

State

TX

Zip Code

78227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.A.F./U.S.ARMY/CIVIL  
SERVICE

Occupation

RETIRED SCIENTIST/CIVIL ENGINEER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

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

Transaction ID: INC.A.13816

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

MRS JOHN B STRASENBURGH

Mailing Address PO BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

8230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13598

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

610.00

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 122 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS ADELAIDE TONG

Mailing Address 1482 CLAY ST

City

SAN FRANCISCO

State

CA

Zip Code

94109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13883

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ELOISE R VALINET

Mailing Address 5300 W 96TH ST

City

INDIANAPOLIS

State

IN

Zip Code

46268

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDIANAPOLIS LIFE INSURAN-  
CE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: INC.A.13726

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City

CINCINNATI

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13716

Amount of Each Receipt this Period

100.00

**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 123 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR RICHARD H BRICKMAN

Mailing Address 720 SOUTHLAWN TER

City

OELWEIN

State

IA

Zip Code

50662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13735

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROLAND DAHMES

Mailing Address 1100 1ST AVE S APT 205

City

SLEEPY EYE

State

MN

Zip Code

56085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13741

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS VIOLA V DEMAN

Mailing Address 63 VERNIER RD

City

GROSSE POINTE

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13731

Amount of Each Receipt this Period

200.00

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

400.00

**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 124 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR HUBERT E SHADRICK

Mailing Address 5821 200TH ST SW APT 127

City

LYNNWOOD

State

WA

Zip Code

98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNOHOMISH COUNTY

Occupation

RETIRED ROAD WORKER-GREASE MONKEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13914

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR Z K STRZALKOWSKI

Mailing Address 6 DANDELION DR

City

BOILING SPRINGS

State

PA

Zip Code

17007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.

Occupation

RETIRED CONTRACT SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13627

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

MR Z K STRZALKOWSKI

Mailing Address 6 DANDELION DR

City

BOILING SPRINGS

State

PA

Zip Code

17007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.

Occupation

RETIRED CONTRACT SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13626

Amount of Each Receipt this Period

100.00

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

2700.00

**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 125 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARTHA H TURNEY

Mailing Address 1361 E BOOT RD # 265

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.08

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: INC.A.13637

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

DR BRIT B GAY, JR

Mailing Address 911 VISTAVIA CIR

City

DECATUR

State

GA

Zip Code

30033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RADIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: INC.A.13670

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR DONALD E KELLEY

Mailing Address 221 E ROCKWOOD BLVD APT 320

City

SPOKANE

State

WA

Zip Code

99202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: INC.A.13928

Amount of Each Receipt this Period

100.00

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

700.00

**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 126 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS GLORIA V KELLEY

Mailing Address 221 E ROCKWOOD BLVD APT 320

City

SPOKANE

State

WA

Zip Code

99202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: INC.A.13930

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS NEATHA O PURTELL

Mailing Address 4 CENTRAL ST APT 4

City

RANDOLPH

State

VT

Zip Code

5060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: INC.A.13588

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MS CLARA B SCANCARELLO

Mailing Address 63 CONWELL AVE

City

SOMERVILLE

State

MA

Zip Code

2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: INC.A.13578

Amount of Each Receipt this Period

100.00

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

350.00

**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 127 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS HILDEGARD BANDY

Mailing Address 1539 GRAND AVE

City

MEDFORD

State

OR

Zip Code

97504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: INC.A.13907

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City

LENA

State

IL

Zip Code

61048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13763

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS CLARA B SCANCARELLO

Mailing Address 63 CONWELL AVE

City

SOMERVILLE

State

MA

Zip Code

2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.08

Date of Receipt

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

Transaction ID: INC.A.13579

Amount of Each Receipt this Period

50.00

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

175.00

**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 128 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR HARRY W SHADE

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: INC.A.13832

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

MS PHYLLIS E SMITH

Mailing Address 5297 GROVE CT

City

MORROW

State

GA

Zip Code

30260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13672

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS ALVINA M SORSBY

Mailing Address 4177 RIDGEWAY PL

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

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

Transaction ID: INC.A.13926

Amount of Each Receipt this Period

1000.00

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

1135.00

**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 129 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS ANNE MAE TRENDT

Mailing Address 2525 W OLD AJO WAY

City

TUCSON

State

AZ

Zip Code

85746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13850

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. NAVY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13676

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MS KATHLEEN D FABIANO

Mailing Address 10214 AVALON DR UNIT 10214

City

WEYMOUTH

State

MA

Zip Code

2188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: INC.A.13581

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) .....

400.00

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 130 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JOSEPH A MC CARTER

Mailing Address 3256 HILDALE AVE

City

OROVILLE

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.P.S & BUTTE COUNTY

Occupation

RETIRED POSTAL CLERK/CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: INC.A.13896

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

LCDR WILLIAM L ROBERTS, RET

Mailing Address 1161 HALL MOUNTAIN RD

City

VIPER

State

KY

Zip Code

41774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S.N.R.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

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

Transaction ID: INC.A.13705

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS JULIA E FRY

Mailing Address 998 21 1/2 RD

City

GRAND JUNCTION

State

CO

Zip Code

81505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: INC.A.13838

Amount of Each Receipt this Period

1000.00

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

1200.00

**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 131 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARTHA SUMMERS

Mailing Address 3177 S GRANT ST

City

ENGLEWOOD

State

CO

Zip Code

80113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

997.00

Date of Receipt

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

Transaction ID: INC.A.13827

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ZETTA R BOLTON

Mailing Address 2147 RONDA GRANADA UNIT D

City

LAGUNA WOODS

State

CA

Zip Code

92637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: INC.A.13876

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13769

Amount of Each Receipt this Period

350.00

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

420.00

**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 132 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR DONALD E BURNEY

Mailing Address 535 W OGDEN AVE # 228

City

NAPERVILLE

State

IL

Zip Code

60563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13759

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR SOLOMON COOK

Mailing Address 303 STATE ROUTE 37

City

HOGANSBURG

State

NY

Zip Code

13655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13621

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)

REV DON DERIVAUX

Mailing Address 2440 BALLGROUND RD

City

VICKSBURG

State

MS

Zip Code

39183

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DIOCESE OF JACKSON

Occupation

RETIRED CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13700

Amount of Each Receipt this Period

50.00

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

550.00

**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 133 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MS KATHLEEN D FABIANO

Mailing Address 10214 AVALON DR UNIT 10214

City

WEYMOUTH

State

MA

Zip Code

2188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13582

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ANN N HUDSON

Mailing Address 730 LEWISON LN

City

VIROQUA

State

WI

Zip Code

54665

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
ELEMENTARY SCHOOL TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13737

Amount of Each Receipt this Period

1.00

**C.**

Full Name (Last, First, Middle Initial)

MRS JANE B LAIRD

Mailing Address 4031 KENNETT PIKE APT 163

City

GREENVILLE

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13640

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

251.00

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 134 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13921

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR LEWIS W LEHR

Mailing Address 10040 E HAPPY VALLEY RD  
APT 604

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEHR FAMILY TRUSTOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13849

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS JEANETTE M MICHAEL

Mailing Address 627 S ADDISON AVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL HARVESTER(N-  
AVISTAR)Occupation  
RETIRED CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13752

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) .....

400.00

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 135 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MISS LORETTA R Q PAN

Mailing Address 600 W 111TH ST

City

NEW YORK

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COLUMBIA UNIVERSITY

Occupation

RETIRED COLLEGE TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13600

Amount of Each Receipt this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13747

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

RETIRED SMALL BUSINESS OWNER/HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 8

Transaction ID: INC.A.13683

Amount of Each Receipt this Period

500.00

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

950.00

**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 136 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR HARRY W SHADE

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13833

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR CARSON A SPEAR, SR

Mailing Address 2325 BERNICE RD

City

LANSING

State

IL

Zip Code

60438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13756

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13859

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) .....

250.00

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



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS MARTHA H TURNEY

Mailing Address 1361 E BOOT RD # 265

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13638

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. NAVYOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: INC.A.13677

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Gail Brown

Mailing Address 4505 California Ave Unit 205

City

Long Beach

State

CA

Zip Code

90807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RnOccupation  
Long Beach Memorial Medical Center

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14119

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

350.00

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 138 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
MS EDNA LEA CHASE

Mailing Address 12 WILLOW CT # E  
LAKEWOOD ESTATES

City State Zip Code  
BRANSON MO 65616

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 ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.13777

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
Jim Mcmanus

Mailing Address 88 Chestnut St  
Weston

City State Zip Code  
MA 02

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Comm. Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.14017

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Gilia Rethman

Mailing Address 47-140 Heno Place

City State Zip Code  
Kaneohe HI 96744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation  
Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: INC.A.14042

Amount of Each Receipt this Period

25.00

**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 139 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Eric Schultz

Mailing Address 4415 Middle Ridge Drive  
Fairfax

City State Zip Code  
VA 22

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14366

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Charles Snider

Mailing Address 6062 Lakewood Dr.  
Gilmer

City State Zip Code  
TX 75

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14383

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Taylor

Mailing Address 733 Whitney Rd

City State Zip Code  
Anchorage AK 99501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Management

Occupation  
Craig Taylor Equipment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14399

Amount of Each Receipt this Period

50.00

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

100.00

**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 140 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Warren Andrews

Mailing Address 7639 Pointview Circle  
Orlando

City State Zip Code  
FL 32

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.13936

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN C CLEGG

Mailing Address 1785 N 1500 E

City State Zip Code  
PROVO UT 84604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.13847

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Lowell Hedges

Mailing Address 3960 Larue Prospect Rd S

City State Zip Code  
Prospect OH 43342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.13996

Amount of Each Receipt this Period

25.00

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

90.00

**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 141 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Jenice Hewes

Mailing Address 720 County Road 3100  
Clarksville

City State Zip Code  
TX 75

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14221

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Virginia Louw

Mailing Address PO Box 130

City State Zip Code  
Vail AZ 85641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Administrative

Occupation  
Louws Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14011

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Barbara Neurohr

Mailing Address 6 Strawood Pt.  
Homosassa

City State Zip Code  
FL 34

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14025

Amount of Each Receipt this Period

25.00

**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 142 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Helen Payne

Mailing Address 5131 Sandyfields Ln.

City

State

Zip Code

Katy

TX

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14033

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR EXCEL I SMITH

Mailing Address PO BOX 187

City

State

Zip Code

TRINCHERA

CO

81081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETIRED RANCHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.13835

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MR WALTER L WHITCOMB, JR

Mailing Address 39480 N CAMBRIDGE BLVD

City

State

Zip Code

WADSWORTH

IL

60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.13750

Amount of Each Receipt this Period

150.00

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

1175.00

**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 143 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Cynthia Yetnikoff

Mailing Address 9019 Norma Place  
West Hollywood

City State Zip Code  
CA 90

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: INC.A.14438

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR VICTOR JOHN JAWORSKY

Mailing Address PO BOX 196

City State Zip Code  
ORANGEBURG NY 10962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

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

Transaction ID: INC.A.13609

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Edw. P. Passailaigue

Mailing Address 5685 Rolling Acres Lane  
Cumming

City State Zip Code  
GA 30

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RET.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: INC.A.14032

Amount of Each Receipt this Period

25.00

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

100.00

**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 144 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Howard Rambin

Mailing Address 1455 West Loop South Suite 700  
Houston

City State Zip Code  
TX 77

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.14037

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS BEULAH ARNOLD

Mailing Address 614 LEBANON AVE

City State Zip Code  
CAMPBELLSVILLE KY 42718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: INC.A.13710

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR JAMES H DUNN

Mailing Address 2124 CORTEZ LN

City State Zip Code  
SACRAMENTO CA 95825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.13888

Amount of Each Receipt this Period

200.00

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

400.00

**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 145 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR JAMES H DUNN

Mailing Address 2124 CORTEZ LN

City

SACRAMENTO

State

CA

Zip Code

95825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: INC.A.13889

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MRS MARY EARLE DRAWDY

Mailing Address 645 PIEDMONT GOLF COURSE RD

City

PIEDMONT

State

SC

Zip Code

29673

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 ▼

325.00

Date of Receipt

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

Transaction ID: INC.A.13665

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

MRS JANE B LAIRD

Mailing Address 4031 KENNETT PIKE APT 163

City

GREENVILLE

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13641

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

250.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 181

(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)

National Campaign Fund

**A.**Full Name (Last, First, Middle Initial)  
MR VERNON M NEFF

Mailing Address PO BOX 426

City	State	Zip Code
LAKIN	KS	67860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: INC.A.13788

Amount of Each Receipt this Period

100.00

**B.**Full Name (Last, First, Middle Initial)  
MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City	State	Zip Code
CHESTER	MT	59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.00

Date of Receipt

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

Transaction ID: INC.A.13748

Amount of Each Receipt this Period

100.00

**C.**Full Name (Last, First, Middle Initial)  
Annette RawlsMailing Address 510 Highway 114  
Rison

City	State	Zip Code
AR	71	

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: INC.A.14341

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

225.00

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 147 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MRS JOHN B STRASENBURGH

Mailing Address PO BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

8230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: INC.A.13599

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ANNE MAE TRENDT

Mailing Address 2525 W OLD AJO WAY

City

TUCSON

State

AZ

Zip Code

85746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: INC.A.13851

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MRS JEANNE C WATSON

Mailing Address 2016 TRIXIE LN

City

HOUSTON

State

TX

Zip Code

77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.08

Date of Receipt

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

Transaction ID: INC.A.13810

Amount of Each Receipt this Period

50.00

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

550.00

**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 148 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Sharon Lefore

Mailing Address 84760 Highway 339

City

Milton-Freewater

State

OR

Zip Code

97862

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed Beekeeper

Occupation

Lefore Honey Farms

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: INC.A.15312

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Len Long

Mailing Address 1104longviewdr  
Nb

City

NC

State

28

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ret

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

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

Transaction ID: INC.A.14276

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Leah Schatzki

Mailing Address 4 Larch Lane

City

Moraga

State

CA

Zip Code

94556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Billing Analyst

Occupation

Chevron

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

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

Transaction ID: INC.A.14049

Amount of Each Receipt this Period

25.00

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

550.00

**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 149 / 181

(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)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Magalen Webert

Mailing Address 6521 SE Harbor Circle

City

Stuart

State

FL

Zip Code

34996

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation

Branestrom LLC

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	/	2	2	/	2	0	0	8

Transaction ID: INC.A.14070

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. NAVY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: INC.A.13678

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS KATHERINE E BROADSTONE

Mailing Address 1834 W NEWMAN PKWY

City

PEORIA

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: INC.A.13770

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

350.00

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 150 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

MR RUSSELL N LEE, II

Mailing Address 3707 MADRONA ST

City

BREMERTON

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

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

Transaction ID: INC.A.13922

Amount of Each Receipt this Period

90.00

**B.**

Full Name (Last, First, Middle Initial)

MS KAY G POITRAS

Mailing Address 27 LAKE HAMILTON BEACH

City

HAINES CITY

State

FL

Zip Code

33844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1402.08

Date of Receipt

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

Transaction ID: INC.A.13686

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR HARRY W SHADE

Mailing Address 11701 W 21ST PL

City

LAKEWOOD

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: INC.A.13834

Amount of Each Receipt this Period

50.00

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

340.00

**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 151 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)

Joan Smith

Mailing Address P.O. Box 326

City

Tribune

State

KS

Zip Code

67879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.14987

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR CARSON A SPEAR, SR

Mailing Address 2325 BERNICE RD

City

LANSING

State

IL

Zip Code

60438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: INC.A.13757

Amount of Each Receipt this Period

70.00

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

320.00

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

87133.06

# **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 152 / 181

<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)  
National Campaign Fund

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AMEX Fees</p> <p>Mailing Address 1101 Frederick Street</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Merchant fees</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><b>Transaction ID:</b> EXP.B.12375</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="505.62"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Direct Response Data Mngt</p> <p>Mailing Address 2070 Chain Bridge Rd # 520</p> <p>City Vienna State VA Zip Code 22182</p> <p>Purpose of Disbursement Data entry</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EXP.B.13497</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3252.34"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Merchant Services</p> <p>Mailing Address 1 Western Maryland Parkway</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Merchant fees</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EXP.B.13495</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="90.00"/></p>

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

**3847.96**

**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)

PAGE 153 / 181

<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)  
National Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Barrett Garcia	<b>Transaction ID:</b> EXP.B.13502 <b>Date of Disbursement</b>																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</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	1	0		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	8												
City San Juan Capistran State CA Zip Code 92675	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">710.00</td> </tr> </table>	710.00																			
710.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Landslide Communications	<b>Transaction ID:</b> EXP.B.13503 <b>Date of Disbursement</b>																				
Mailing Address 30011 Ivy Glenn Dr., Ste 223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</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	1	0		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	8												
City Laguna Niguel State CA Zip Code 92677	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement General committee management fees Candidate Name	<table border="1"> <tr> <td colspan="10">20000.00</td> </tr> </table>	20000.00																			
20000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Postmaster	<b>Transaction ID:</b> EXP.B.13505 <b>Date of Disbursement</b>																				
Mailing Address 8 Herbert Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</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	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City Alexandria State VA Zip Code 22305	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Bulk Rate Mail fee Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

**23710.00**

**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)

PAGE 154 / 181

<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)  
National Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) SunTrust Merchant Services	<b>Transaction ID:</b> EXP.B.13512 <b>Date of Disbursement</b>
Mailing Address 1 Western Maryland Parkway	<div> <div>11</div> <div>03</div> <div>2008</div> </div>
City Hagerstown State MD Zip Code 21740	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Merchant fees Candidate Name	<div>281.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Washington Intelligence Bureau	<b>Transaction ID:</b> EXP.B.13506 <b>Date of Disbursement</b>
Mailing Address 4128 Pepsi Place	<div> <div>11</div> <div>03</div> <div>2008</div> </div>
City Chantilly State VA Zip Code 20151	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Admin accounting services Candidate Name	<div>2986.57</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) WJG Marketing Services	<b>Transaction ID:</b> EXP.B.13531 <b>Date of Disbursement</b>
Mailing Address 5712-H Industry Lane	<div> <div>11</div> <div>04</div> <div>2008</div> </div>
City Frederick State MD Zip Code 21074	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement General account services Candidate Name	<div>2021.46</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**5289.03**

**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)

PAGE 155 / 181

<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)  
National Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Barrett Garcia	<b>Transaction ID:</b> EXP.B.13534 <b>Date of Disbursement</b>																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>6</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	1	1		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	6		2	0	0	8												
City State Zip Code San Juan Capistran CA 92675 Purpose of Disbursement Accounting services Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>585.00</td> </tr> </table>	585.00																			
585.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Visteva	<b>Transaction ID:</b> EXP.B.13520 <b>Date of Disbursement</b>																				
Mailing Address 12881 Knott Street, Ste 105	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>6</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	1	1		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	6		2	0	0	8												
City State Zip Code Garden Grove CA 92841 Purpose of Disbursement eDonations fee Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00																			
20.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Landslide Communications	<b>Transaction ID:</b> EXP.B.13536 <b>Date of Disbursement</b>																				
Mailing Address 30011 Ivy Glenn Dr., Ste 223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>7</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	1	1		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	7		2	0	0	8												
City State Zip Code Laguna Niguel CA 92677 Purpose of Disbursement General committee management Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type																				

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

10605.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 156 / 181

<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)  
National Campaign Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Regus	<b>Transaction ID:</b> EXP.B.13537 <b>Date of Disbursement</b>																				
Mailing Address 1101 Pennsylvania Ave 5th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>8</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	1	1		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	8		2	0	0	8												
City Washington State DC Zip Code 20004	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td>445.31</td> </tr> </table>	445.31																			
445.31																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) SunTrust Merchant Services	<b>Transaction ID:</b> EXP.B.13542 <b>Date of Disbursement</b>																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>1</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	1	1		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	1		2	0	0	8												
City Hagerstown State MD Zip Code 21740	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Merchant fees	<table border="1"> <tr> <td>1704.58</td> </tr> </table>	1704.58																			
1704.58																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Visteva	<b>Transaction ID:</b> EXP.B.13556 <b>Date of Disbursement</b>																				
Mailing Address 12881 Knott Street, Ste 105	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	0	8												
City Garden Grove State CA Zip Code 92841	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement eDonation fee	<table border="1"> <tr> <td>82.67</td> </tr> </table>	82.67																			
82.67																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) .....

2232.56

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)

PAGE 157 / 181

<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)  
National Campaign Fund

**A.**

Full Name (Last, First, Middle Initial)  
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Merchant fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: EXP.B.13557

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

631.59

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

631.59

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

46316.14

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 158 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00437822</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eagle Publishing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address One Massachusetts Ave., 6th Floor		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3586.00</div>	
City Washington State DC Zip Code 20001		<b>Transaction ID:</b> EDT.EALC.207	
Purpose of Expenditure E-mail broadcasts		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 477266.71		<input type="checkbox"/> Other (specify) : _____ 2008	
Full Name (Last, First, Middle, Initial) of Payee Excellentia Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 4224 67th Ave CT W		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5497.50</div>	
City University Place State WA Zip Code 98466		<b>Transaction ID:</b> EDT.EALC.208	
Purpose of Expenditure Book publishing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 477266.71		<input type="checkbox"/> Other (specify) : _____ 2008	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">9083.50</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 3</div> <div style="border: 1px solid black; padding: 2px;">D D 2 3</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 9</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 159 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee North Woods Graphics		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address 3252 SE Nelson Road		Amount 5000.00	
City State Zip Code Olalla WA 98359		Transaction ID: EDT.EALC.209	
Purpose of Expenditure Graphics production		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee Patriot Data Services		Date MM / DD / YYYY 10 / 16 / 2008	
Mailing Address 44084 Riverside Parkway, Suite 350		Amount 2000.00	
City State Zip Code Lansdowns VA 20176		Transaction ID: EDT.EALC.215	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		7000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 160 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Southwest Publishing		Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8	
Mailing Address 2600 NW Topeka Blvd		Amount 1339.00	
City State Zip Code Topeka KS 66617		Transaction ID: EDT.EALC.216	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 13871.45	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.217	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		15210.45	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 161 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data Mngt		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5586.20	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.220	
Purpose of Expenditure Data entry		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 9988.60	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.218	
Purpose of Expenditure Mailing services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		15574.80	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 162 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 20941.07	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.219	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management Svc		Date MM / DD / YYYY 10 / 22 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 12770.57	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.221	
Purpose of Expenditure Folding/inserting ma- il		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		33711.64	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 163 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data Mngt		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5889.82	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.222	
Purpose of Expenditure Data entry		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
1073328.25			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management Svc		Date MM / DD / YYYY 10 / 27 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 21074.98	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.223	
Purpose of Expenditure Folding/inserting ma- il		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
1073328.25			
(a) SUBTOTAL of Itemized Independent Expenditures .....		26964.80	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 164 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data Mngt		Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 3252.34	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.224	
Purpose of Expenditure Data entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
1073328.25			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5742.60	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.225	
Purpose of Expenditure Mailing services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
1073328.25			
(a) SUBTOTAL of Itemized Independent Expenditures .....		8994.94	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 165 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eagle Publishing		Date M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8	
Mailing Address One Massachusetts Ave., 6th Floor		Amount 1390.00	
City State Zip Code Washington DC 20001		Transaction ID: EDT.EALC.226	
Purpose of Expenditure E-newsletter sponsor-ship		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee North Woods Graphics		Date M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8	
Mailing Address 3252 SE Nelson Road		Amount 3500.00	
City State Zip Code Olalla WA 98359		Transaction ID: EDT.EALC.227	
Purpose of Expenditure Video production		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		4890.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 166 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Strategic Services Advisors		Date M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8	
Mailing Address 3110 Judson St. PMB #221		Amount 1000.00	
City State Zip Code Gig Harbor WA 98335		Transaction ID: EDT.EALC.228	
Purpose of Expenditure Production consulting		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee North Woods Graphics		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
Mailing Address 3252 SE Nelson Road		Amount 509.81	
City State Zip Code Olalla WA 98359		Transaction ID: EDT.EALC.229	
Purpose of Expenditure Video production		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		1509.81	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 167 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee C4Strategies		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 8230 Catbird Circle #302		Amount 7347.50	
City State Zip Code Lorton VA 22079		Transaction ID: PDT.E.10	
Purpose of Expenditure Website services		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee C4Strategies		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 8230 Catbird Circle #302		Amount 17633.03	
City State Zip Code Lorton VA 22079		Transaction ID: PDT.E.18	
Purpose of Expenditure Website services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71			
(a) SUBTOTAL of Itemized Independent Expenditures .....		17633.03	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 168 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data Mngt		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 1551.98	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.230	
Purpose of Expenditure Data Entry		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
Full Name (Last, First, Middle, Initial) of Payee Eagle Publishing		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address One Massachusetts Ave., 6th Floor		Amount 6317.00	
City State Zip Code Washington DC 20001		Transaction ID: PDT.E.11	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		1551.98	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 169 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eagle Publishing		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address One Massachusetts Ave., 6th Floor		Amount 3441.50	
City Washington State DC Zip Code 20001		Transaction ID: PDT.E.16	
Purpose of Expenditure E-mail broadcasts		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71			
Full Name (Last, First, Middle, Initial) of Payee Envision Marketing		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 148 Graves Mill Rd		Amount 2703.01	
City Lynchburg State VA Zip Code 24502		Transaction ID: PDT.E.20	
Purpose of Expenditure Marketing services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71			
(a) SUBTOTAL of Itemized Independent Expenditures .....		6144.51	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 170 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Excellentia Inc.		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 4224 67th Ave CT W		Amount 5497.50	
City State Zip Code University Place WA 98466		Transaction ID: PDT.E.12	
Purpose of Expenditure Book publishing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management Svc		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 7347.35	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.231	
Purpose of Expenditure Folding/inserting ma- il		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		7347.35	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 171 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 6771.61	
City Vienna State VA Zip Code 22182		Transaction ID: PDT.E.17	
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 4717.23	
City Vienna State VA Zip Code 22182		Transaction ID: EDT.EALC.232	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought 1073328.25			
(a) SUBTOTAL of Itemized Independent Expenditures .....		11488.84	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 172 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 24889.97	
City State Zip Code Vienna VA 22182		Transaction ID: PDT.E.21	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1073328.25			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 1177.85	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.233	
Purpose of Expenditure Mailing services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought 1073328.25			
(a) SUBTOTAL of Itemized Independent Expenditures .....		26067.82	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 173 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Response Dynamics, Inc.		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 21898.95	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.234	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
1073328.25			
Full Name (Last, First, Middle, Initial) of Payee Strategic Services Advisors		Date MM / DD / YYYY 11 / 03 / 2008	
Mailing Address 3110 Judson St. PMB #221		Amount 2000.00	
City State Zip Code Gig Harbor WA 98335		Transaction ID: PDT.E.19	
Purpose of Expenditure Website services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought			
477266.71			
(a) SUBTOTAL of Itemized Independent Expenditures .....		23898.95	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 174 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Advanced Mailing Services		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 17970 Farm Creek Drive		Amount 1525.73	
City State Zip Code Woodbridge VA 22191		Transaction ID: EDT.EALC.237	
Purpose of Expenditure Mailing services		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee Direct Response Data Mngt		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 2500.00	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.238	
Purpose of Expenditure Data entry		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		4025.73	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 175 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fulfillment Management Svc		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 6252.48	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.239	
Purpose of Expenditure Folding/inserting ma- il		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
1073328.25			
Full Name (Last, First, Middle, Initial) of Payee MDI Imaging & Mail		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 21955 Cascades Parkway		Amount 12840.88	
City State Zip Code Dulles VA 20166		Transaction ID: EDT.EALC.240	
Purpose of Expenditure Mailing services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
477266.71			
(a) SUBTOTAL of Itemized Independent Expenditures .....		19093.36	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 176 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Patriot Data Services		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 44084 Riverside Parkway, Suite 350		Amount 6157.62	
City: Lansdowns State: VA Zip Code: 20176		Transaction ID: EDT.EALC.241	
Purpose of Expenditure Mailing and postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee Robertson's Mailing List		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 17970 Farm Creek Drive		Amount 14879.91	
City: Woodbridge State: VA Zip Code: 22191		Transaction ID: EDT.EALC.242	
Purpose of Expenditure Mailing lists		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		21037.53	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 177 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Southwest Publishing		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 2600 NW Topeka Blvd		Amount 17588.08	
City State Zip Code Topeka KS 66617		Transaction ID: EDT.EALC.243	
Purpose of Expenditure Mailing services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
Full Name (Last, First, Middle, Initial) of Payee Star Envelope		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 7521 Pulaski Highway		Amount 1174.23	
City State Zip Code Baltimore MD 21237		Transaction ID: EDT.EALC.244	
Purpose of Expenditure Envelopes		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 477266.71		2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		18762.31	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 178 / 181

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Richard Norman Company		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 44084 Riverside Parkway, #350		Amount 13356.32	
City State Zip Code Lansdowne VA 20176		Transaction ID: EDT.EALC.246	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
477266.71			
Full Name (Last, First, Middle, Initial) of Payee Valley Press Inc		Date MM / DD / YYYY 11 / 04 / 2008	
Mailing Address 17 Warren Road		Amount 1857.44	
City State Zip Code Baltimore MD 21208		Transaction ID: EDT.EALC.247	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
477266.71			
(a) SUBTOTAL of Itemized Independent Expenditures .....		15213.76	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....		295205.11	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 03 / 23 / 2009	

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 179 / 181

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
National Campaign Fund**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
C4StrategiesNature of Debt (Purpose):  
Website services

Mailing Address 8230 Catbird Circle #302

City State ZIP Code  
Lorton VA 22079

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAY:D:15460

Amount Incurred This Period

7347.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

7347.50

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Eagle PublishingNature of Debt (Purpose):  
Postage

Mailing Address One Massachusetts Ave., 6th Floor

City State ZIP Code  
Washington DC 20001

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAY:D:15458

Amount Incurred This Period

6317.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6317.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Excellentia Inc.Nature of Debt (Purpose):  
Book publishing

Mailing Address 4224 67th Ave CT W

City State ZIP Code  
University Place WA 98466

Outstanding Balance Beginning This Period

0.00

Transaction ID: PAY:D:15459

Amount Incurred This Period

5497.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

5497.50

**1) SUBTOTALS** This Period This Page (optional).....

19162.00

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

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 180 / 181

FOR LINE NUMBER:  
(check only one)

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

NAME OF COMMITTEE (In Full)  
National Campaign Fund

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Response Dynamics, Inc.

Nature of Debt (Purpose):  
P.O.Box and bulk rate mai-  
ling account deposit

Mailing Address 2070 Chain Bridge Rd # 520

City	State	ZIP Code
Vienna	VA	22182

Outstanding Balance Beginning This Period

1960.00

Transaction ID: PAY:D:107

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1960.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1960.00

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

21122.00

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) ▶

21122.00

Image# 29933386898

Form/Schedule: **F3XA**

Accrue independent expenditures prior to election (paid within same reporting period after the election)

Transaction ID:

\*\*\*\*\*