

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

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

FOR LINE NUMBER: PAGE 162 / 235  
(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 Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. Von Riesen, CLU, ChFC  
 Mailing Address 312 N 96th Street  
 City State Zip Code  
 Omaha NE 68114  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 1 2 / 2 0 0 7  
**Transaction ID:** 6476514  
 Amount of Each Receipt this Period  
 275.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SilverStone Group, Inc. Insurance Agent  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 375.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas M. Rountree, CLU, ChFC,  
 Mailing Address 1984 S. Newark Way  
 City State Zip Code  
 Aurora CO 80014  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 1 1 / 2 0 0 7  
**Transaction ID:** 6476534  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AmerUs Life Insurance Agent  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Howard B. Cowan, CLU ChFC  
 Mailing Address 941 Park Ave 8B  
 City State Zip Code  
 New York NY 10028  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 6 / 2 0 0 7  
**Transaction ID:** 6476560  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cowan Financial Group President  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1025.00  
**TOTAL** This Period (last page this line number only) ..... ►