

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

CMR Political Action Committee

ADDRESS (number and street) PO Box 2485

Check if different than previously reported. (ACC)

Springfield VA 22152-0485

2. **FEC IDENTIFICATION NUMBER** C00469429

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

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 07 01 2010 through 09 30 2010

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 Robert F. Carlin

Signature of Treasurer Electronically Filed by Robert F. Carlin Date 12 02 2010

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
CMR Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		15641.40
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	44990.97									
(c) Total Receipts (from Line 19)	82500.00	142445.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	127490.97	158086.40								
7. Total Disbursements (from Line 31)	91588.43	122183.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	35902.54	35902.54								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
CMR Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	55000.00	142400.00
(ii) Unitemized	0.00	-54995.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	55000.00	87405.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	27500.00	55040.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	82500.00	142445.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	82500.00	142445.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	82500.00	142445.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5788.43	6783.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5788.43	6783.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	68900.00	98500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	16900.00	16900.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	91588.43	122183.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	91588.43	122183.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	82500.00	142445.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	82500.00	142445.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5788.43	6783.86
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5788.43	6783.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 43
	<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)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Dennis Bassford	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 6720 Fort Dent Way Suite 230	Transaction ID: SA11AI-34-193-c
	City State Zip Code Tukwila WA 98188-2589	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Money Tree, Inc. Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Sara Bassford	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 6720 Fort Dent Way Suite 230	Transaction ID: SA11AI-315-196-c
	City State Zip Code Tukwila WA 98188-2589	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Money Tree Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Mr. James Cowles	Date of Receipt MM / DD / YYYY 08 / 26 / 2010
	Mailing Address 2506 S Boxwood Lane	Transaction ID: SA11AI-27-132-c
	City State Zip Code Spokane WA 99223-4938	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 43
	<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)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Wanda Cowles		Date of Receipt MM / DD / YYYY 08 / 26 / 2010		
	Mailing Address 2506 S Boxwood Lane		Transaction ID: SA11AI-28-133-c		
	City Spokane	State WA	Zip Code 99223-4938	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

B.	Full Name (Last, First, Middle Initial) Betty Freeman		Date of Receipt MM / DD / YYYY 09 / 23 / 2010		
	Mailing Address PO Box 1012		Transaction ID: SA11AI-255-155-c		
	City Bellevue	State WA	Zip Code 98009-1012	Amount of Each Receipt this Period 2500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Homemaker	Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

C.	Full Name (Last, First, Middle Initial) Mr. Kemper Freeman		Date of Receipt MM / DD / YYYY 09 / 23 / 2010		
	Mailing Address PO Box 1012		Transaction ID: SA11AI-254-154-c		
	City Bellevue	State WA	Zip Code 98009-1012	Amount of Each Receipt this Period 2500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Kemper Development Co.	Occupation Commercial Real Estate Developer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 43
(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)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. John Hennessy

Mailing Address 3532 207th Avenue SE

City State Zip Code
Sammamish WA 98075-9688

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NUPRECON, LP President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11AI-317-201-c

Amount of Each Receipt this Period 5000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Barton Nelson

Mailing Address 3482 Cottonwood Road

City State Zip Code
Walla Walla WA 99362-1854

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Nelson Irrigation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 01 / 2010

Transaction ID: SA11AI-225-131-c

Amount of Each Receipt this Period 5000.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Karen Nelson

Mailing Address 3482 Cottonwood Road

City State Zip Code
Walla Walla WA 99362-1854

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 01 / 2010

Transaction ID: SA11AI-224-130-c

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) 15000.00

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 9 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. Christine Perry

Mailing Address PO Box 645

City State Zip Code
Medina WA 98039-0645

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2010
Transaction ID: SA11AI-320-134-c

Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
Mrs Beatriz Schweitzer

Mailing Address 330 NW Brandon Drive

City State Zip Code
Pullman WA 99163-3674

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI-164-88-c

Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Dr. Edmund Schweitzer, III

Mailing Address 330 NW Brandon Drive

City State Zip Code
Pullman WA 99163-3674

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Schweitzer Engineering Labs President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI-163-87-c

Amount of Each Receipt this Period 5000.00

Split with Spouse

SUBTOTAL of Receipts This Page (optional) 15000.00

TOTAL This Period (last page this line number only) 55000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 43

(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial)
American College Of Radiology Association Political Action Committee

Mailing Address 1891 Preston White Drive

City State Zip Code
Reston VA 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11C-19-200-c

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Boeing Company Political Action Committee, The

Mailing Address 1200 Wilson Boulevard

City State Zip Code
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11C-316-198-c

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Farm Credit Council Political Action Committee

Mailing Address 50 F Street NW
Suite 900

City State Zip Code
Washington DC 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 21 / 2010

Transaction ID: SA11C-201-107-c

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

12500.00

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 11 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Microsoft Corporation Political Action Committee

Mailing Address 16011 NE 36th Way
97017

City State Zip Code
Redmond WA 98052-6301

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: SA11C-55-197-c

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Premera Blue Cross Political Action Committee/premera Pac

Mailing Address 7001 220th Street SW

City State Zip Code
Mountlake Terrace WA 98043-2160

FEC ID number of contributing federal political committee. **C** C00409227

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: SA11C-227-136-c

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Pricewaterhousecoopers Political Action Committee I

Mailing Address 1301 K Street NW
Suite 800W

City State Zip Code
Washington DC 20005-3317

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: SA11C-21-106-c

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **10000.00**

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 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Pricewaterhousecoopers Political Action Committee I

Mailing Address 1301 K Street NW
Suite 800W

City State Zip Code
Washington DC 20005-3317

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2010

Transaction ID: SA11C-21-129-c

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Tuesday Group Political Action Committee

Mailing Address PO Box 11586

City State Zip Code
Washington DC 20008-0786

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: SA11C-313-191-c

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 5000.00

TOTAL This Period (last page this line number only) ► 27500.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Complete Campaigns Full Name (Last, First, Middle Initial) Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Fundraising: Credit Card Merchant Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-125-135-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00 Category/Type: 003

B. Concentric Office, LLC Full Name (Last, First, Middle Initial) Mailing Address 8136 Old Keene MI Road Suite A300 City Springfield State VA Zip Code 22152-1853 Purpose of Disbursement Compliance Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-37-109-e Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 3783.43 Category/Type: 001

C. The Catalyst Group, LLC Full Name (Last, First, Middle Initial) Mailing Address 1115 Massachusetts Avenue NW Lower LEVEL City Washington State DC Zip Code 20005-4604 Purpose of Disbursement Fundraising: Finance Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-50-108-e Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1755.00 Category/Type: 003

SUBTOTAL of Disbursements This Page (optional)	5788.43
TOTAL This Period (last page this line number only)	5788.43

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Andy Barr For Congress, Inc.	Transaction ID: SB23-178-95-e Date of Disbursement
	Mailing Address PO Box 2059	<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Lexington State KY Zip Code 40588-2059	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Garland "Andy" Barr	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ann Marie Buerkle For Congress	Transaction ID: SB23-304-185-e Date of Disbursement
	Mailing Address 3779 Underwood Way	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Syracuse State NY Zip Code 13215-6600	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="2000.00"/>
	Candidate Name Ann Marie Buerkle	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Austin Scott For Congress Inc	Transaction ID: SB23-271-163-e Date of Disbursement
	Mailing Address PO Box 27750	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Macon State GA Zip Code 31221-7750	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name James Austin Scott	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Bass Victory Committee <hr/> Mailing Address PO Box 3451 <hr/> City Concord State NH Zip Code 03302-3451 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Charles F. Bass <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-290-172-e Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Benishek For Congress <hr/> Mailing Address 802 Pentoga Trail <hr/> City Crystal Falls State MI Zip Code 49920-8518 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Daniel J Benishek <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-239-142-e Date of Disbursement 09 / 14 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Bobby Schilling For Congress <hr/> Mailing Address 367 Avenue Of The Cities Suite D <hr/> City East Moline State IL Zip Code 61244-4053 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Robert Todd Schilling <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-273-164-e Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Bruun For Congress

Transaction ID: SB23-296-175-e
Date of Disbursement

Mailing Address 23069 Bland Circle

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

City State Zip Code
West Linn OR 97068-8278

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011

Category/
Type

Candidate Name
Lorentz 'Scott' Bruun

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: OR District: 05

B.

Full Name (Last, First, Middle Initial)
Canseco For Congress

Transaction ID: SB23-251-148-e
Date of Disbursement

Mailing Address 10004 Wurzbach Road # 366

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	0

City State Zip Code
San Antonio TX 78230-2214

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011

Category/
Type

Candidate Name
Francisco 'Quico' Canseco

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: TX District: 23

C.

Full Name (Last, First, Middle Initial)
Chris Gibson For Congress

Transaction ID: SB23-247-146-e
Date of Disbursement

Mailing Address PO Box 53

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	0

City State Zip Code
Hudson NY 12534-0053

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011

Category/
Type

Candidate Name
Christopher Patrick Gibson

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: NY District: 20

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Committee To Elect Jeff Miller Mailing Address PO Box 6338 City Hendersonville State NC Zip Code 28793-6338 Purpose of Disbursement Non Federal Committee Contribution Candidate Name Jeffery Lane Miller Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-286-170-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	7	/	2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	2	7	/	2	0	1	0														
500.00																							
B.	Full Name (Last, First, Middle Initial) Crawford For Congress Mailing Address PO Box 16956 City Jonesboro State AR Zip Code 72403-6716 Purpose of Disbursement Committee Contribution Candidate Name Eric Alan Rick Crawford Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-166-89-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	2	0	/	2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7	/	2	0	/	2	0	1	0														
500.00																							
C.	Full Name (Last, First, Middle Initial) Daniel Webster For Congress Mailing Address 3400 Old Winter Garden Road City Orlando State FL Zip Code 32805-1134 Purpose of Disbursement Committee Contribution Candidate Name Daniel Webster Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-233-139-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	4	/	2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	1	4	/	2	0	1	0														
500.00																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table>	1500.00
1500.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: center;"> </td> </tr> </table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) David Schweikert For Congress	Transaction ID: SB23-259-157-e Date of Disbursement
	Mailing Address 15749 E El Lago Boulevard	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Fountain Hills State AZ Zip Code 85268-3901	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name David Schweikert	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Demmer For Congress	Transaction ID: SB23-278-166-e Date of Disbursement
	Mailing Address PO Box 6	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Hayfield State MN Zip Code 55940-0006	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Randy Lee Demmer	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Diane Black For Congress	Transaction ID: SB23-221-127-e Date of Disbursement
	Mailing Address 819 Plantation Boulevard	<input type="text" value="08"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Gallatin State TN Zip Code 37066-4497	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name Diane Lynn Black	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 43

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Diane Black For Congress	Transaction ID: SB23-221-187-e Date of Disbursement
	Mailing Address 819 Plantation Boulevard	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Gallatin State TN Zip Code 37066-4497	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1400.00"/>
	Candidate Name Diane Lynn Black	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Djou For Hawaii	Transaction ID: SB23-54-149-e Date of Disbursement
	Mailing Address PO Box 235280	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Honolulu State HI Zip Code 96823-3504	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1000.00"/>
	Candidate Name Charles Kong Djou	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dold For Congress	Transaction ID: SB23-170-91-e Date of Disbursement
	Mailing Address PO Box 8145	<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Northfield State IL Zip Code 60093-8145	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Mr. Robert James Dold Jr.	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Fimian For Congress 2010 (fimian 2010)

Mailing Address PO Box 3131

City State Zip Code
Oakton VA 22124-9131

Purpose of Disbursement
Committee Contribution

Candidate Name
Keith S Fimian

Office Sought: House
 Senate
 President

State: VA District: 11

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23-198-104-e
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B. Full Name (Last, First, Middle Initial)
Fitzpatrick For Congress

Mailing Address PO Box 185

City State Zip Code
Langhorne PA 19047-0185

Purpose of Disbursement
Committee Contribution

Candidate Name
Michael G Fitzpatrick

Office Sought: House
 Senate
 President

State: PA District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23-186-99-e
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C. Full Name (Last, First, Middle Initial)
Friends Of David Harmer

Mailing Address 9321 Silverbend Lane

City State Zip Code
Elk Grove CA 95624-3985

Purpose of Disbursement
Committee Contribution

Candidate Name
David Jeffrey Harmer

Office Sought: House
 Senate
 President

State: CA District: 11

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23-168-90-e
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends Of Frank Guinta <hr/> Mailing Address PO Box 877 <hr/> City Manchester State NH Zip Code 03105-0877 Purpose of Disbursement Committee Contribution Candidate Name Frank Guinta Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-288-171-e Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends Of Joe Heck <hr/> Mailing Address PO Box 750114 <hr/> City Las Vegas State NV Zip Code 89136-0114 Purpose of Disbursement Committee Contribution Candidate Name Joe Heck Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-180-96-e Date of Disbursement 07 / 20 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends Of Nan Hayworth <hr/> Mailing Address PO Box 189 <hr/> City Mount Kisco State NY Zip Code 10549-0189 Purpose of Disbursement Committee Contribution Candidate Name Nan Hayworth Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-245-145-e Date of Disbursement 09 / 14 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends Of Nan Hayworth <hr/> Mailing Address PO Box 189 <hr/> City Mount Kisco State NY Zip Code 10549-0189 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Nan Hayworth <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-245-184-e Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 1900.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends Of Roy Blunt <hr/> Mailing Address PO Box 50100 <hr/> City Springfield State MO Zip Code 65805-0100 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Roy Blunt <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-253-150-e Date of Disbursement 09 / 16 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends Of Todd Young <hr/> Mailing Address PO Box 1053 <hr/> City Bloomington State IN Zip Code 47402-1053 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Todd Christopher Young <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-176-94-e Date of Disbursement 07 / 20 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3400.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gibbs For Congress	Transaction ID: SB23-294-174-e Date of Disbursement
	Mailing Address 6992 Township Road 466	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="2010"/> <input type="text" value="2010"/>
	City Lakeville State OH Zip Code 44638-9794	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Robert Brian Gibbs	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Graves For Congress	Transaction ID: SB23-161-85-e Date of Disbursement
	Mailing Address 103 Kelly Mill Road	<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="14"/> <input type="text" value="14"/> / <input type="text" value="2010"/> <input type="text" value="2010"/>
	City Cumming State GA Zip Code 30040-2314	Amount of Each Disbursement this Period
	Purpose of Disbursement General Election Contribution	<input type="text" value="1000.00"/>
	Candidate Name John Thomas Graves, Jr.	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Harold Johnson For Congress	Transaction ID: SB23-284-169-e Date of Disbursement
	Mailing Address 349-L Copperfield Blvd Suite 233	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="2010"/> <input type="text" value="2010"/>
	City Concord State NC Zip Code 28025	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Harold Nelson Johnson	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeff Perry For Congress Mailing Address PO Box 1435 City Sandwich State MA Zip Code 02563-1435 Purpose of Disbursement Committee Contribution Candidate Name Jeffrey Davis Perry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-275-165-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	1	0														
500.00																							
B.	Full Name (Last, First, Middle Initial) Jon Runyan For Congress, Inc Mailing Address PO Box 225 City Colonia State NJ Zip Code 07067-0225 Purpose of Disbursement Committee Contribution Candidate Name Jon Runyan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-243-144-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	4		2	0	1	0														
500.00																							
C.	Full Name (Last, First, Middle Initial) Kapanke For Congress Mailing Address PO Box 937 City La Crosse State WI Zip Code 54602-0937 Purpose of Disbursement Committee Contribution Candidate Name Dan Kapanke Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-298-177-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	1	0														
500.00																							

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kelly For Congress	Transaction ID: SB23-261-158-e Date of Disbursement
	Mailing Address PO Box 89520	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Tucson State AZ Zip Code 85752-9520	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Jesse Kelly	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kinzinger For Congress	Transaction ID: SB23-172-92-e Date of Disbursement
	Mailing Address PO Box 1050	<input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Bourbonnais State IL Zip Code 60914-7050	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Adam Kinzinger	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Koster For Congress	Transaction ID: SB23-52-176-e Date of Disbursement
	Mailing Address PO Box 231	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Arlington State WA Zip Code 98223-0231	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name John Koster	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Koster For Congress <hr/> Mailing Address PO Box 231 <hr/> City Arlington State WA Zip Code 98223-0231 <hr/> Purpose of Disbursement Committee Contribution Candidate Name John Koster <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-52-190-e Date of Disbursement 09 / 29 / 2010
	Amount of Each Disbursement this Period 1900.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kristi For Congress <hr/> Mailing Address PO Box 852 <hr/> City Sioux Falls State SD Zip Code 57101-0852 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Kristi Lynn Noem <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-192-101-e Date of Disbursement 07 / 20 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Kristi For Congress <hr/> Mailing Address PO Box 852 <hr/> City Sioux Falls State SD Zip Code 57101-0852 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Kristi Lynn Noem <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-192-186-e Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 1900.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4300.00
TOTAL This Period (last page this line number only) ▶	(Empty)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Martha Roby for Congress Mailing Address PO Box 195 City Montgomery State AL Zip Code 36101-0195 Purpose of Disbursement Committee Contribution <input type="checkbox"/> 011 Category/Type Candidate Name Martha Roby Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 02	Transaction ID: SB23-38-180-e Date of Disbursement 09 / 27 / 2010 Amount of Each Disbursement this Period 2000.00
B.	Full Name (Last, First, Middle Initial) Mckinley For Congress Mailing Address 32 20th Street City Wheeling State WV Zip Code 26003-3746 Purpose of Disbursement Committee Contribution <input type="checkbox"/> 011 Category/Type Candidate Name David B Mckinley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WV District: 01	Transaction ID: SB23-200-105-e Date of Disbursement 07 / 20 / 2010 Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Michael Grimm For Congress Mailing Address 560 9th Street City Brooklyn State NY Zip Code 11215-4206 Purpose of Disbursement Committee Contribution <input type="checkbox"/> 011 Category/Type Candidate Name Michael Grimm Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 13	Transaction ID: SB23-312-189-e Date of Disbursement 09 / 29 / 2010 Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mike Kelly For Congress

Transaction ID: SB23-249-147-e
Date of Disbursement

Mailing Address PO Box 476

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	0

City Lyndora State PA Zip Code 16045-0476

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011
Category/
Type

Candidate Name
George J Kelly, Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 03

B.

Full Name (Last, First, Middle Initial)
Mike Keown For Congress

Transaction ID: SB23-269-162-e
Date of Disbursement

Mailing Address PO Box 96

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

City Coolidge State GA Zip Code 31738-0096

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011
Category/
Type

Candidate Name
Michael Huel (mike) Keown

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: GA District: 02

C.

Full Name (Last, First, Middle Initial)
Mobrooksforcongress.Com

Transaction ID: SB23-229-137-e
Date of Disbursement

Mailing Address 7610 Foxfire Drive SE

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	0

City Huntsville State AL Zip Code 35802-2716

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011
Category/
Type

Candidate Name
Mo Brooks

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AL District: 05

SUBTOTAL of Disbursements This Page (optional)

1500.00

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 29 / 43

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mulvaney For Congress

Transaction ID: SB23-188-100-e
Date of Disbursement

Mailing Address 9789 Charlotte Highway
Suite 400-255

07 / 20 / 2010

City Indian Land State SC Zip Code 29707-7177

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Committee Contribution

011
Category/
Type

Candidate Name
John Michael 'Mick' Mulvaney

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: SC District: 05

B.

Full Name (Last, First, Middle Initial)
National Federation of Republican Women

Transaction ID: SB23-162-86-e
Date of Disbursement

Mailing Address 124 N Alfred Street

07 / 14 / 2010

City Alexandria State VA Zip Code 22314-3011

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Committee Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
National Republican Congressional Committee

Transaction ID: SB23-6-188-e
Date of Disbursement

Mailing Address 320 1st Street SE

09 / 27 / 2010

City Washington State DC Zip Code 20003-1838

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Committee Contribution

011
Category/
Type

Candidate Name
National Republican Congressional Committee

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Pantano For North Carolina Committee

Mailing Address 5700 Oleander Drive

City Wilmington State NC Zip Code 28403-4714

Purpose of Disbursement
Committee Contribution

Candidate Name
Ilario Gregory Pantano

Office Sought: House
 Senate
 President
State: NC District: 07

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23-282-168-e
Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Paul Gosar For Congress

Mailing Address 2222 E Cedar Avenue

City Flagstaff State AZ Zip Code 86004-1988

Purpose of Disbursement
Committee Contribution

Candidate Name
Paul Anthony Gosar

Office Sought: House
 Senate
 President
State: AZ District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23-257-156-e
Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Randy Altschuler For Congress

Mailing Address PO Box 657

City Stony Brook State NY Zip Code 11790-0657

Purpose of Disbursement
Committee Contribution

Candidate Name
Mr. Randolph Altschuler

Office Sought: House
 Senate
 President
State: NY District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23-292-173-e
Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Randy Hultgren For Congress	Transaction ID: SB23-174-93-e Date of Disbursement
	Mailing Address PO Box 39	<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Batavia State IL Zip Code 60510-0039	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Randy Hultgren	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ribble For Congress	Transaction ID: SB23-300-178-e Date of Disbursement
	Mailing Address PO Box 7200	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="27"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Appleton State WI Zip Code 54912-7069	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Reid Ribble	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robert Hurt For Congress	Transaction ID: SB23-196-103-e Date of Disbursement
	Mailing Address PO Box 2	<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/>
	City Chatham State VA Zip Code 24531-0002	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Robert Hurt	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Robin Smith For Tennessee</p> <p>Mailing Address 6231 Perimeter Drive Suite 113</p> <p>City Chattanooga State TN Zip Code 37421-3658</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Robin Tucker Smith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-219-126-e Date of Disbursement 08 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Ryan Frazier For Colorado</p> <p>Mailing Address PO Box 140182</p> <p>City Edgewater State CO Zip Code 80214-0182</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Ryan L Frazier</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-267-161-e Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sandy Adams For Congress</p> <p>Mailing Address PO Box 1566</p> <p>City Orlando State FL Zip Code 32802-1566</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Sandy Adams</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 24</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-235-140-e Date of Disbursement 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sandy Adams For Congress	Transaction ID: SB23-235-181-e Date of Disbursement
	Mailing Address PO Box 1566	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Orlando State FL Zip Code 32802-1566	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1900.00"/>
	Candidate Name Sandy Adams	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Southernland For Congress	Transaction ID: SB23-231-138-e Date of Disbursement
	Mailing Address PO Box 1692	<input type="text" value="09"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Lynn Haven State FL Zip Code 32444-6492	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name William Steve Southernland, II	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Spike Maynard For Congress	Transaction ID: SB23-302-179-e Date of Disbursement
	Mailing Address PO Box 1	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Williamson State WV Zip Code 25661-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Elliott Edward Maynard	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Steve Fincher For Congress</p> <p>Mailing Address PO Box 11153</p> <p>City Jackson State TN Zip Code 38308-0119</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Steve Fincher</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-194-102-e</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Tom Ganley For Congress</p> <p>Mailing Address PO Box 41331</p> <p>City Brecksville State OH Zip Code 44141-0331</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Thomas D Ganley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-184-98-e</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Tom Reed For Congress</p> <p>Mailing Address 99 W 1st Street</p> <p>City Corning State NY Zip Code 14830-2557</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Thomas W Reed, II</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 29</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-182-97-e</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Van Tran For Congress	Transaction ID: SB23-263-159-e Date of Disbursement
	Mailing Address 2150 River Plaza Drive Suite 150	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Sacramento State CA Zip Code 95833-4131	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Van Tran	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Vicky Hartzler For Congress	Transaction ID: SB23-280-167-e Date of Disbursement
	Mailing Address PO Box 531	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Harrisonville State MO Zip Code 64701-0531	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Vicky Jo Hartzler	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Vicky Hartzler For Congress	Transaction ID: SB23-280-183-e Date of Disbursement
	Mailing Address PO Box 531	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Harrisonville State MO Zip Code 64701-0531	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="1900.00"/>
	Candidate Name Vicky Jo Hartzler	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Votetipton.Com	Transaction ID: SB23-265-160-e Date of Disbursement
	Mailing Address PO Box 846	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Cortez State CO Zip Code 81321-0846	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Scott R Tipton	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Walberg For Congress	Transaction ID: SB23-241-143-e Date of Disbursement
	Mailing Address 6769 Teachout Road	<input type="text" value="09"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Tipton State MI Zip Code 49287-9807	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Timothy L. Walberg	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Walorski For Congress Inc	Transaction ID: SB23-93-182-e Date of Disbursement
	Mailing Address PO Box 16	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Elkhart State IN Zip Code 46515-0016	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="2000.00"/>
	Candidate Name Jackie Walorski (swihart)	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Washington State Republican Party	Transaction ID: SB23-222-128-e Date of Disbursement
	Mailing Address 2840 Northup Way Suite 140	<input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Bellevue State WA Zip Code 98004-1433	Amount of Each Disbursement this Period
	Purpose of Disbursement Non Federal Contribution	<input type="text" value="4000.00"/>
	Candidate Name Washington State Republican Party	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Washington State Republican Party	Transaction ID: SB23-222-192-e Date of Disbursement
	Mailing Address 2840 Northup Way Suite 140	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Bellevue State WA Zip Code 98004-1433	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="10000.00"/>
	Candidate Name Washington State Republican Party	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Yoder For Congress	Transaction ID: SB23-237-141-e Date of Disbursement
	Mailing Address PO Box 26742	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Overland Park State KS Zip Code 66225-6742	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Kevin W Yoder	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: KS District: 03	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="68900.00"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 43

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) 6th Leg Dist Repub Comm Non Exempt <hr/> Mailing Address 1200 W. Freya Ave <hr/> City Spokane State WA Zip Code 99202 <hr/> Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-217-125-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 4000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Campaign To Elect Paul Harris <hr/> Mailing Address 1916 SE 130th Avenue <hr/> City Vancouver State WA Zip Code 98683-6565 <hr/> Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-210-118-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 800.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens For Michael Baumgartner <hr/> Mailing Address PO Box 48237 <hr/> City Spokane State WA Zip Code 99228-1237 <hr/> Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-202-110-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1600.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	6400.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Citizens For Nancy Wyatt <hr/> Mailing Address PO Box 7726 <hr/> City Covington State WA Zip Code 98042-0046 Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-213-121-e Date of Disbursement MM / DD / YYYY 08 / 02 / 2010
	Amount of Each Disbursement this Period 800.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Citizens For Skip Priest <hr/> Mailing Address PO Box 23237 <hr/> City Federal Way State WA Zip Code 98093-0237 Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-216-124-e Date of Disbursement MM / DD / YYYY 08 / 02 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens For Steve Litzow <hr/> Mailing Address 7683 SE 27th Street # 431 <hr/> City Mercer Island State WA Zip Code 98040-2804 Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-211-119-e Date of Disbursement MM / DD / YYYY 08 / 02 / 2010
	Amount of Each Disbursement this Period 800.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial) Committee To Elect Joel Kretz Mailing Address 1014 Toroda Creek Road City Wauconda State WA Zip Code 98859-9711 Purpose of Disbursement Non Federal Committee Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-204-112-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 800.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee To Elect Kevin Parker Mailing Address PO Box 198 City Spokane State WA Zip Code 99210-0198 Purpose of Disbursement Non Federal Committee Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-203-111-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1600.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Committee To Re-Elect Maureen Walsh Mailing Address 606 E Sumach Street City Walla Walla State WA Zip Code 99362-1324 Purpose of Disbursement Non Federal Committee Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-209-117-e Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2900.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A. Full Name (Last, First, Middle Initial)
Committee To Re-Elect Terry Nealey

Mailing Address PO Box 7

City Dayton State WA Zip Code 99328-0007

Purpose of Disbursement
Non Federal Committee Contribution
Candidate Name

011
Category/
Type

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

Transaction ID: SB29-208-116-e
Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Friends For Susan Fagan

Mailing Address PO Box 1471

City Pullman State WA Zip Code 99163-1441

Purpose of Disbursement
Non Federal Committee Contribution
Candidate Name

011
Category/
Type

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

Transaction ID: SB29-206-114-e
Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

1600.00

C. Full Name (Last, First, Middle Initial)
Friends Of Diane Tebelius

Mailing Address PO Box 53486

City Bellevue State WA Zip Code 98015-3486

Purpose of Disbursement
Non Federal Committee Contribution
Candidate Name

011
Category/
Type

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

Transaction ID: SB29-215-123-e
Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends Of Joe Fain <hr/> Mailing Address PO Box 7809 <hr/> City Covington State WA Zip Code 98042-0046 <hr/> Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-214-122-e Date of Disbursement 08 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 800.00
B.	Full Name (Last, First, Middle Initial) People For Joe Schmick <hr/> Mailing Address PO Box 620 <hr/> City Colfax State WA Zip Code 99111-0620 <hr/> Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-207-115-e Date of Disbursement 08 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Peter Dunbar For State Representative <hr/> Mailing Address 8441 SE 68th Street PMB 263 <hr/> City Mercer Island State WA Zip Code 98040-5235 <hr/> Purpose of Disbursement Non Federal Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29-212-120-e Date of Disbursement 08 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 800.00

SUBTOTAL of Disbursements This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CMR Political Action Committee

A.	Full Name (Last, First, Middle Initial) Shelly For State		Transaction ID: SB29-205-113-e	
	Mailing Address PO Box 37		Date of Disbursement 08 / 02 / 2010	
	City Addy	State WA	Zip Code 99101-0037	
	Purpose of Disbursement Non Federal Committee Contribution		Amount of Each Disbursement this Period 800.00	
	Candidate Name		011 Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶

800.00

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

16900.00