

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
National Funeral Directors Association of the United States Inc

ADDRESS (number and street) 13625 Bishops Drive  
 Check if different than previously reported. (ACC)  
Brookfield WI 53005

2. **FEC IDENTIFICATION NUMBER** C00204008  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 04 2008 in the State of WI

5. Covering Period 10 16 2008 through 11 24 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer William C. Wappner, CFSP

Signature of Treasurer Electronically Filed by William C. Wappner, CFSP Date 02 18 2009

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
National Funeral Directors Association of the United States Inc

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		47609.92
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	14059.92									
(c) Total Receipts (from Line 19) .....	30570.00	117120.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	44629.92	164729.92								
7. Total Disbursements (from Line 31) .....	12000.20	132100.20								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	32629.72	32629.72								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
National Funeral Directors Association of the United States Inc

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12775.00	49900.00
(i) Itemized (use Schedule A) .....	17795.00	67220.00
(ii) Unitemized .....	30570.00	117120.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	30570.00	117120.00
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)) .....	30570.00	117120.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30570.00	117120.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8125.00	128225.00
24. Independent Expenditure (use Schedule E) .....	3875.20	3875.20
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.....	0.00	0.00
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))..	12000.20	132100.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.20	132100.20

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	30570.00	117120.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30570.00	117120.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

<b>A.</b>	Full Name (Last, First, Middle Initial) Scott B. Anthony	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 1031 Ridge Rd	<b>Transaction ID:</b> SA11AI.13207
	City State Zip Code Webster NY 14580-2907	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert L Bates	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address PO Box 368	<b>Transaction ID:</b> SA11AI.13296
	City State Zip Code De Kalb TX 75559-0368	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Fred A. Behner	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address PO Box 610	<b>Transaction ID:</b> SA11AI.13135
	City State Zip Code Fairfield IA 52556-0011	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NA Funeral Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	520.00
<b>TOTAL</b> 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 7 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
Jack D Briggs  
Mailing Address PO Box 218  
City State Zip Code  
Denton NC 27239-0218  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Briggs Funeral Home Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2008  
**Transaction ID:** SA11AI.13056  
Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Ginger C. Caldwell  
Mailing Address PO Box 630  
City State Zip Code  
Covington GA 30014-2420  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Caldwell & Cowan Funeral Home Inc. Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
565.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 27 / 2008  
**Transaction ID:** SA11AI.13077  
Amount of Each Receipt this Period  
65.00

**C.** Full Name (Last, First, Middle Initial)  
Deborah Daniels  
Mailing Address PO Box 573  
City State Zip Code  
Greenville AL 36037-0573  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
NA Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 30 / 2008  
**Transaction ID:** SA11AI.13080  
Amount of Each Receipt this Period  
385.00

**SUBTOTAL** of Receipts This Page (optional) ..... 650.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

<p><b>A.</b> Full Name (Last, First, Middle Initial) Carlos R. Guerra</p> <p>Mailing Address 5800 E Beverly Blvd</p> <p>City State Zip Code <b>Los Angeles CA 90022-2898</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Guerra &amp; Gutierrez Mortuaries Funeral Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1100.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> <span style="border: 1px solid black; padding: 2px;">11 / 07 / 2008</span></p> <p><b>Transaction ID: SA11AI.13190</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Steven A. Hairfield</p> <p>Mailing Address PO Box 3591</p> <p>City State Zip Code <b>Morganton NC 28680</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Hairfield Vault Co Salesman</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> <span style="border: 1px solid black; padding: 2px;">10 / 31 / 2008</span></p> <p><b>Transaction ID: SA11AI.13289</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">300.00</span></p>
---	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Terry Harmon</p> <p>Mailing Address 500 S 1st Ave</p> <p>City State Zip Code <b>Arcadia CA 91006-3831</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Arcadia Chapel of Remembrance Funeral Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1100.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> <span style="border: 1px solid black; padding: 2px;">10 / 31 / 2008</span></p> <p><b>Transaction ID: SA11AI.13248</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



**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 9 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

<b>A.</b>	Full Name (Last, First, Middle Initial) Doretha F Hector		Date of Receipt	
	Mailing Address 4000 Callaway Ave		M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.13147
	Baltimore	MD	21215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer Phillips Funeral Home		Occupation Funeral Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Bryant Hightower		Date of Receipt	
	Mailing Address PO Box 215		M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.13075
	Carrollton	GA	30112-0004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
Name of Employer Martin & Hightower F H Inc Heritage Ch		Occupation Funeral Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Bryant Hightower		Date of Receipt	
	Mailing Address PO Box 215		M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.13076
	Carrollton	GA	30112-0004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		200.00	
Name of Employer Martin & Hightower F H Inc Heritage Ch		Occupation Funeral Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> 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 10 / 23  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
James C. Hirsch  
Mailing Address 7151 183rd St  
City State Zip Code  
Tinley Park IL 60477-3932  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NA Occupation Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 335.00  
Date of Receipt MM / DD / YYYY  
11 / 20 / 2008  
Transaction ID: SA11AI.13197  
Amount of Each Receipt this Period 335.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jim Bob Humphrey  
Mailing Address PO Box 819  
City State Zip Code  
Russellville AR 72811  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Humphrey Funeral Service Occupation Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1255.00  
Date of Receipt MM / DD / YYYY  
10 / 30 / 2008  
Transaction ID: SA11AI.13158  
Amount of Each Receipt this Period 1255.00

**C.** Full Name (Last, First, Middle Initial)  
Michael B. Hurtt  
Mailing Address 217 S Hampton Rd  
City State Zip Code  
DeSoto TX 75115-5764  
FEC ID number of contributing federal political committee. **C**  
Name of Employer West-Hurtt Funeral Home Occupation Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt MM / DD / YYYY  
10 / 30 / 2008  
Transaction ID: SA11AI.13058  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1840.00  
**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 / 23

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Frank H Jones

Mailing Address PO BOX 555

City State Zip Code  
Richton MS 39476-0555

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

Name of Employer Occupation  
HL Jones Funeral Home Funeral Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.13103

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Kukuchka

Mailing Address 73 W Tioga St

City State Zip Code  
Tunkhannock PA 18657-1446

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

Name of Employer Occupation  
Sheldon-Kukuchka Funeral Home Inc Funeral Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.13195

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Kukuchka

Mailing Address 73 W Tioga St

City State Zip Code  
Tunkhannock PA 18657-1446

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

Name of Employer Occupation  
Sheldon-Kukuchka Funeral Home Inc Funeral Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

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

Transaction ID: SA11AI.12954

Amount of Each Receipt this Period

100.00

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

800.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 23  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Diana D. Kurz, CFSP

Mailing Address 20 Bonair Ave.

City State Zip Code  
Newington CT 06111

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

Name of Employer Occupation  
Newington Memorial FH Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2008

**Transaction ID:** SA11AI.13021

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick T Lanigan

Mailing Address 700 Linden Ave

City State Zip Code  
East Pittsburgh PA 15112-1206

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

Name of Employer Occupation  
Patrick T Lanigan Funeral Home Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2008

**Transaction ID:** SA11AI.13039

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Patrick E Lynch

Mailing Address 1368 N Crooks Rd

City State Zip Code  
Clawson MI 48017-1092

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

Name of Employer Occupation  
Lynch & Sons Funeral Directors Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
10 / 31 / 2008

**Transaction ID:** SA11AI.12956

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
Robert C. Moore

Mailing Address 1591 Alps Rd

City State Zip Code  
Wayne NJ 07470-3641

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

Name of Employer Occupation  
Moore's Home for Funerals Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2008

**Transaction ID:** SA11AI.13026

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Meg Mountcastle, CFSP

Mailing Address 4143 Dale Blvd

City State Zip Code  
Dale City VA 22193-2224

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

Name of Employer Occupation  
Mountcastle Funeral Home Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2215.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2008

**Transaction ID:** SA11AI.13203

Amount of Each Receipt this Period  
2215.00

**C.** Full Name (Last, First, Middle Initial)  
Meg Mountcastle

Mailing Address 4143 Dale Blvd

City State Zip Code  
Dale City VA 22193-2224

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

Name of Employer Occupation  
Mountcastle FH Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2008

**Transaction ID:** SA11AI.13202

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2815.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
Myron Nohava

Mailing Address PO Box 200

City State Zip Code  
Baltic SD 57003-0200

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

Name of Employer Occupation  
Minnehaha Funeral Home Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 07 / 2008

**Transaction ID:** SA11AI.13144

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Meredith I. Norton

Mailing Address 10325 S Parkglenn Way

City State Zip Code  
Parker CO 80138-3853

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

Name of Employer Occupation  
NA Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 04 / 2008

**Transaction ID:** SA11AI.13244

Amount of Each Receipt this Period  
530.00

**C.** Full Name (Last, First, Middle Initial)  
James M Olson

Mailing Address 1132 Superior Avenue

City State Zip Code  
Sheboygan WI 53081

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

Name of Employer Occupation  
Lippert-Olson Funeral Home Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 29 / 2008

**Transaction ID:** SA11AI.13221

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **830.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 23

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)  
Bruce A. Overton, CFSP

Mailing Address 714 1st St

City State Zip Code  
Traer IA 50675-1008

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

Name of Employer Occupation  
Overton Funeral Home Funeral Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.13133

Amount of Each Receipt this Period

100.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
Rick D. Phillips

Mailing Address PO Box 7236

City State Zip Code  
East Wenatchee WA 98802-0236

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

Name of Employer Occupation  
NA Funeral Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 290.00

Date of Receipt

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

Transaction ID: SA11AI.13175

Amount of Each Receipt this Period

290.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
Robert Rosson

Mailing Address PO Box 1200

City State Zip Code  
Oxford MS 38655-1200

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

Name of Employer Occupation  
Waller Funeral Home Funeral Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.13086

Amount of Each Receipt this Period

200.00
--------

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

590.00
--------

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

--

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 23  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)  
Curtis Rostad

Mailing Address 1305 W 96th St Ste A

City Indianapolis State IN Zip Code 46260-1193

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

Name of Employer Indiana Funeral Directors Assn Occupation Funeral Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** SA11AI.12999

Amount of Each Receipt this Period  
280.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Mark Russell

Mailing Address 230 Waterman St

City Providence State RI Zip Code 02906-5203

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

Name of Employer Monahan-Drabble-Sherman Occupation Funeral Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

**Transaction ID:** SA11AI.13011

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian L. Smith

Mailing Address 85 S Main St

City Keyser State WV Zip Code 26726-3120

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

Name of Employer NA Occupation Funeral Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

**Transaction ID:** SA11AI.13054

Amount of Each Receipt this Period  
220.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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



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

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

FOR LINE NUMBER: PAGE 17 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
Paul C St. Pierre

Mailing Address 1074 Old Eagle Way

City Greenwood State IN Zip Code 46143

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

Name of Employer: Wilson- St. Pierre Funeral Ser Occupation: Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 27 / 2008  
Transaction ID: SA11AI.13272  
Amount of Each Receipt this Period: 350.00

**B.** Full Name (Last, First, Middle Initial)  
Wendell Stringer

Mailing Address PO Box 884

City Hazlehurst State MS Zip Code 39083-0884

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

Name of Employer: Stringer Funeral Home Occupation: Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.13098  
Amount of Each Receipt this Period: 200.00

**C.** Full Name (Last, First, Middle Initial)  
Wendell Stringer

Mailing Address PO Box 884

City Hazlehurst State MS Zip Code 39083-0884

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

Name of Employer: Stringer Funeral Home Occupation: Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 04 / 2008  
Transaction ID: SA11AI.13099  
Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
Robert F Vandenberg  
Mailing Address 59302 Glacier Club Drive

City State Zip Code  
Washington MI 48094

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

Name of Employer N/A Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 06 / 2008  
Transaction ID: SA11AI.13180  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
William C. Wappner, CFSP  
Mailing Address 98 S Diamond St

City State Zip Code  
Mansfield OH 44902-9954

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

Name of Employer Wappner Funeral Directors Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 27 / 2008  
Transaction ID: SA11AI.13118  
Amount of Each Receipt this Period: 360.00

**C.** Full Name (Last, First, Middle Initial)  
William C. Wappner, CFSP  
Mailing Address 98 S Diamond St

City State Zip Code  
Mansfield OH 44902-9954

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

Name of Employer Wappner Funeral Directors Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.13119  
Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 560.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

**A.** Full Name (Last, First, Middle Initial)  
William C. Wappner, CFSP  
 Mailing Address 98 S Diamond St  
 City Mansfield State OH Zip Code 44902-9954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wappner Funeral Directors Occupation Funeral Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00  
 Date of Receipt 10 / 29 / 2008  
**Transaction ID:** SA11AI.13120  
 Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
David Weber  
 Mailing Address 401 S Chester St  
 City Baltimore State MD Zip Code 21231-2730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer David J Weber Funeral Homes Occupation Funeral Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00  
 Date of Receipt 10 / 27 / 2008  
**Transaction ID:** SA11AI.13046  
 Amount of Each Receipt this Period 220.00

**C.** Full Name (Last, First, Middle Initial)  
David Weber  
 Mailing Address 401 S Chester St  
 City Baltimore State MD Zip Code 21231-2730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer David J Weber Funeral Homes Occupation Funeral Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00  
 Date of Receipt 10 / 29 / 2008  
**Transaction ID:** SA11AI.13045  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 420.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 23	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

<b>A.</b>	Full Name (Last, First, Middle Initial) Ora L. Wooster, III		Date of Receipt																					
	Mailing Address 51 Park Blvd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	0	6	/	2	0	0	8														
	City	State	Zip Code		<b>Transaction ID:</b> SA11AI.13178																			
	Clementon	NJ	08021-4096																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Ora L Wooster Funeral Home		Occupation Funeral Director		<input type="text" value="100.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		<input type="text" value="270.00"/>																				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="12775.00"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
National Funeral Directors Association of the United States Inc

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) <b>DEMOCRATIC SENATORIAL CAMP COM</b></p> <p>Mailing Address <b>120 MARYLAND AVENUE NE</b></p> <p>City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20002</b></p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Candidate Name <b>DEMOCRATIC SENATORIAL CAMP COM</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2008</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB23.12944 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">21</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">5000.00</span></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) <b>KNOLLENBERG FOR CONGRESS COMMITTEE</b></p> <p>Mailing Address <b>31000 Telegraph Road, #110</b></p> <p>City <b>Bingham Farms</b> State <b>MI</b> Zip Code <b>48025</b></p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Candidate Name <b>JOSEPH K. KNOLLENBERG</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2008</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>MI</b> District: <b>09</b></p>	<p><b>Transaction ID:</b> SB23.12945 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1125.00</span></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) <b>LYNN JENKINS FOR CONGRESS</b></p> <p>Mailing Address <b>P.O. Box 1441</b></p> <p>City <b>Topeka</b> State <b>KS</b> Zip Code <b>66601</b></p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Candidate Name <b>LYNN JENKINS</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2010</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>KS</b> District: <b>02</b></p>	<p><b>Transaction ID:</b> SB23.12947 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p>

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

**7125.00**

**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 22 / 23

<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

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

NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)  
MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement

Candidate Name  
MITCH MCCONNELL

Office Sought:  House  
 Senate  
 President

State: KY District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.12949

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

8125.00

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

NAME OF COMMITTEE (In Full) National Funeral Directors Association of the United States Inc		FEC IDENTIFICATION NUMBER <b>C</b> C00204008	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Morning Journal		Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 8	
Mailing Address 308 Maple Street		Amount 3875.20	
City State Zip Code Lisbon OH 44432		Transaction ID: SE.12941	
Purpose of Expenditure Campaign Advertisement		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: CHARLES A WILSON, Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		3875.20	

(a) SUBTOTAL of Itemized Independent Expenditures .....	3875.20
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	3875.20
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
William C. Wappner, CFSP Signature	Date M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9