

# 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  
Manufactured Housing Institute PAC

ADDRESS (number and street) 2111 Wilson Blvd. Suite 100  
 Check if different than previously reported. (ACC)  
Arlington VA 22201

2. **FEC IDENTIFICATION NUMBER** C00043463  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 07 01 2009 through 12 31 2009

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 Ms. Rae Ann Bevington

Signature of Treasurer Electronically Filed by Ms. Rae Ann Bevington Date 03 24 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)

A. Form/Schedule : **F3XA**

Transaction ID :

MHI-PAC updated the manual credit card transaction to a on-line credit card transaction due to the cost savings on bank fees. Bank Error in Receipts and Disbursements due to a Wachovia electronic numeric code entry which incorrectly listed our parent company.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Manufactured Housing Institute PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		97157.99
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	85083.63									
(c) Total Receipts (from Line 19) .....	65954.16	81023.38								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	151037.79	178181.37								
7. Total Disbursements (from Line 31) .....	54058.88	81202.46								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	96978.91	96978.91								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Manufactured Housing Institute PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	12974.12	26302.67
(ii) Unitemized .....	20605.24	22345.91
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	33579.36	48648.58
(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) .....	33579.36	48648.58
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.) .....	32374.80	32374.80
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)) .....	65954.16	81023.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	65954.16	81023.38

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	20750.00	47750.00
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.....	33308.88	33452.46
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))..	54058.88	81202.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54058.88	81202.46

**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) .....	33579.36	48648.58
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33579.36	48648.58
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: PAGE 7 / 33  
(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)  
Manufactured Housing Institute PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ken Cashin

Mailing Address P.O. Box 2442

City State Zip Code  
Tallahassee FL 32316

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Windstorm Mitigation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 13 / 2009  
Transaction ID: 5224805  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jim Miller

Mailing Address 2450 Enterprise St., Drawer A

City State Zip Code  
Fremont OH 43420

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
FMI/Style Crest Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 13 / 2009  
Transaction ID: 5224808  
Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald Glisson, Jr.

Mailing Address 4336 Pablo Oaks Court

City State Zip Code  
Jacksonville FL 32224

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Triad Financial Services, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 13 / 2009  
Transaction ID: 5224809  
Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 6000.00

**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 8 / 33
	<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)  
Manufactured Housing Institute PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Thayer Long	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 2101 Wilson Blvd. Suite 610	<b>Transaction ID:</b> 5732312
	City State Zip Code Arlington VA 22201	Amount of Each Receipt this Period 22.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Manufactured Housing Institute Occupation: Exec. Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 223.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Rae Ann Bevington	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 2101 Wilson Blvd. Suite 610	<b>Transaction ID:</b> 5732313
	City State Zip Code Arlington VA 22201	Amount of Each Receipt this Period 25.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Manufactured Housing Institute Occupation: Vice President, Leg. & Political Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.26	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Ann Parman	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 7800 Blue Jasmine Ct.	<b>Transaction ID:</b> 5732314
	City State Zip Code Springfield VA 22153	Amount of Each Receipt this Period 25.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Manufactured Housing Institute Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 229.32	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	73.26
<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 9 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Thayer Long</p> <p>Mailing Address 2101 Wilson Blvd. Suite 610</p> <p>City State Zip Code Arlington VA 22201</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 Manufactured Housing Institute</p> <p>Occupation Exec. Vice President</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;">245.30</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2009</span></p> <p><b>Transaction ID:</b> 5732315</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">22.30</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Ms. Rae Ann Bevington</p> <p>Mailing Address 2101 Wilson Blvd. Suite 610</p> <p>City State Zip Code Arlington VA 22201</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 Manufactured Housing Institute</p> <p>Occupation Vice President, Leg. &amp; Political</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;">263.74</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2009</span></p> <p><b>Transaction ID:</b> 5732316</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.48</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ann Parman</p> <p>Mailing Address 7800 Blue Jasmine Ct.</p> <p>City State Zip Code Springfield VA 22153</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 Manufactured Housing Institute</p> <p>Occupation Vice President</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;">254.80</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2009</span></p> <p><b>Transaction ID:</b> 5732317</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.48</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">73.26</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 10 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Richard J. Rand	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 8050 N. Port Washington Rd. P.O. Box 17872	<b>Transaction ID:</b> 5732318
	City State Zip Code Milwaukee WI 53217	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Great Value Homes, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Gregory O'Berry	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 150 N. Wacker Drive, Suite 2800	<b>Transaction ID:</b> 5732323
	City State Zip Code Chicago IL 60606	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Hometown America Enterprises Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Chris Parrish	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 1800 Spiny Ridge Ct.	<b>Transaction ID:</b> 5732325
	City State Zip Code Raleigh NC 27612	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Parrish Manor Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<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 11 / 33  
(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)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. E.J. Gleim

Mailing Address 4336 Pa blo Oaks Ct.

City State Zip Code  
Jacksonville FL 32224

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

Name of Employer  
Triad Financial Services, Inc.

Occupation  
Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2009

**Transaction ID:** 5732326

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd.  
Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Exec. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
267.60

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2009

**Transaction ID:** 5732329

Amount of Each Receipt this Period  
22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.28

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2009

**Transaction ID:** 5732330

Amount of Each Receipt this Period  
25.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **547.78**

**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 / 33  
(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)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rae Ann Bevington

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President, Leg. & Political

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
289.22

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2009

**Transaction ID:** 5732331

Amount of Each Receipt this Period  
25.48

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Exec. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
289.90

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2009

**Transaction ID:** 5732332

Amount of Each Receipt this Period  
22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.76

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2009

**Transaction ID:** 5732333

Amount of Each Receipt this Period  
25.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.26**

**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 / 33

(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)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rae Ann Bevington

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation  
Manufactured Housing Institute Vice President, Leg. & Political

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 314.70

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2009

Transaction ID: 5732334

Amount of Each Receipt this Period

25.48

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation  
Manufactured Housing Institute Exec. Vice President

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 312.20

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2009

Transaction ID: 5732337

Amount of Each Receipt this Period

22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer Occupation  
Manufactured Housing Institute Vice President

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 331.24

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2009

Transaction ID: 5732338

Amount of Each Receipt this Period

25.48

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

73.26

**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 / 33  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rae Ann Bevington

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President, Leg. & Political

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.18

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2009

**Transaction ID:** 5732339

Amount of Each Receipt this Period  
25.48

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Exec. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.50

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2009

**Transaction ID:** 5732340

Amount of Each Receipt this Period  
22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
356.72

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2009

**Transaction ID:** 5732341

Amount of Each Receipt this Period  
25.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.26**

**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 / 33  
(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)  
Manufactured Housing Institute PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Rae Ann Bevington		Date of Receipt MM / DD / YYYY 09 / 30 / 2009		
	Mailing Address 2101 Wilson Blvd. Suite 610		<b>Transaction ID:</b> 5732342		
	City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 25.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Manufactured Housing Institute	Occupation Vice President, Leg. & Political	Aggregate Year-to-Date 365.66		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Thayer Long		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 2101 Wilson Blvd. Suite 610		<b>Transaction ID:</b> 5732366		
	City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 22.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Manufactured Housing Institute	Occupation Exec. Vice President	Aggregate Year-to-Date 356.80		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Rae Ann Bevington		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 2101 Wilson Blvd. Suite 610		<b>Transaction ID:</b> 5732367		
	City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 25.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Manufactured Housing Institute	Occupation Vice President, Leg. & Political	Aggregate Year-to-Date 391.14		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	73.26
<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: (check only one)	PAGE 16 / 33
	<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)  
Manufactured Housing Institute PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Ann Parman	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	Mailing Address 7800 Blue Jasmine Ct.	<b>Transaction ID:</b> 5732368
	City State Zip Code Springfield VA 22153	Amount of Each Receipt this Period 25.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Manufactured Housing Institute Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 382.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Thayer Long	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 2101 Wilson Blvd. Suite 610	<b>Transaction ID:</b> 5732369
	City State Zip Code Arlington VA 22201	Amount of Each Receipt this Period 22.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Manufactured Housing Institute Occupation Exec. Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 379.10	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Rae Ann Bevington	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 2101 Wilson Blvd. Suite 610	<b>Transaction ID:</b> 5732371
	City State Zip Code Arlington VA 22201	Amount of Each Receipt this Period 25.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Manufactured Housing Institute Occupation Vice President, Leg. & Political Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.62	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	73.26
<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: (check only one)	PAGE 17 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Ann Parman	Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Mailing Address 7800 Blue Jasmine Ct.	<b>Transaction ID:</b> 5732372
	City State Zip Code Springfield VA 22153	Amount of Each Receipt this Period 25.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Manufactured Housing Institute Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.68

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Manuel Santana	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 9
	Mailing Address 7030 W. Beverly Road	<b>Transaction ID:</b> 5732376
	City State Zip Code Laveen AZ 85339	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Cavco Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Michael R. Bowen	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 9
	Mailing Address 2107 Berkshire Club Dr.	<b>Transaction ID:</b> 5732379
	City State Zip Code Cincinnati OH 45230	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer American Modern Insurance Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	335.48
<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 18 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Cramer

Mailing Address 1057 Meadowview Dr.

City State Zip Code  
Apollo PA 15613

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

Name of Employer Rimco Properties      Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** 5732380

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Nancy Geer

Mailing Address 35 Commerce Avenue

City State Zip Code  
Albany NY 12206

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

Name of Employer New York Manufactured Housing Associat      Occupation Executive Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
535.00

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

**Transaction ID:** 5732429

Amount of Each Receipt this Period  
535.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard Ernst

Mailing Address 11829 Buffalo Creek Place

City State Zip Code  
Dallas TX 75230

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

Name of Employer FINMARK      Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID:** 5732477

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1785.00**

**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 / 33

(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)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Barry McCabe

Mailing Address 150 N. Wacker Drive, Suite 2800

City State Zip Code  
Chicago IL 60606

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

Name of Employer Occupation  
Hometown America Enterprises President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

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

Transaction ID: 5732595

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd.  
Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation  
Manufactured Housing Institute Exec. Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 401.40

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 5735198

Amount of Each Receipt this Period

22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer Occupation  
Manufactured Housing Institute Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 433.16

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 9

Transaction ID: 5735199

Amount of Each Receipt this Period

25.48

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

2047.78

**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 / 33  
(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)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rae Ann Bevington

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President, Leg. & Political

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
442.10

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2009

**Transaction ID:** 5735200

Amount of Each Receipt this Period  
25.48

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Exec. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
423.70

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2009

**Transaction ID:** 5735201

Amount of Each Receipt this Period  
22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
458.64

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2009

**Transaction ID:** 5735202

Amount of Each Receipt this Period  
25.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.26**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 33  
(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
							17

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rae Ann Bevington

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President, Leg. & Political

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
467.58

Date of Receipt  
MM / DD / YYYY  
11 / 30 / 2009

**Transaction ID:** 5735203

Amount of Each Receipt this Period  
25.48

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Exec. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
446.00

Date of Receipt  
MM / DD / YYYY  
12 / 15 / 2009

**Transaction ID:** 5735204

Amount of Each Receipt this Period  
22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
484.12

Date of Receipt  
MM / DD / YYYY  
12 / 15 / 2009

**Transaction ID:** 5735205

Amount of Each Receipt this Period  
25.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.26**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 33  
(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)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rae Ann Bevington

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President, Leg. & Political

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
493.06

Date of Receipt  
MM / DD / YYYY  
12 / 15 / 2009

**Transaction ID:** 5735206

Amount of Each Receipt this Period  
25.48

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thayer Long

Mailing Address 2101 Wilson Blvd. Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Exec. Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
468.30

Date of Receipt  
MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** 5735207

Amount of Each Receipt this Period  
22.30

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Ann Parman

Mailing Address 7800 Blue Jasmine Ct.

City State Zip Code  
Springfield VA 22153

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

Name of Employer  
Manufactured Housing Institute

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
509.60

Date of Receipt  
MM / DD / YYYY  
12 / 24 / 2009

**Transaction ID:** 5735208

Amount of Each Receipt this Period  
25.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.26**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 23 / 33	
	(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

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Rae Ann Bevington		Date of Receipt																					
	Mailing Address 2101 Wilson Blvd. Suite 610		<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>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		2	4		2	0	0	9														
	City State Zip Code Arlington VA 22201		<b>Transaction ID:</b> 5735209																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.48																					
Name of Employer Manufactured Housing Institute		Occupation Vice President, Leg. & Political																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 518.54																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	25.48
<b>TOTAL</b> This Period (last page this line number only) .....	▶	12974.12

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 33

(check only one)

<input 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 checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Manufactured Housing Institute PAC

**A.**

Full Name (Last, First, Middle Initial)  
Manufactured Housing Institute

Mailing Address 2101 Wilson Blvd., Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6716.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2009

Transaction ID: 5732311

Amount of Each Receipt this Period

6716.83

Bank Error

**B.**

Full Name (Last, First, Middle Initial)  
Manufactured Housing Institute

Mailing Address 2101 Wilson Blvd., Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
16256.82

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2009

Transaction ID: 5732328

Amount of Each Receipt this Period

9539.99

Bank Error

**C.**

Full Name (Last, First, Middle Initial)  
Manufactured Housing Institute

Mailing Address 2101 Wilson Blvd., Suite 610

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32374.80

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2009

Transaction ID: 5732336

Amount of Each Receipt this Period

16117.98

Bank Error

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

32374.80

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

32374.80

**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 25 / 33

<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)  
Manufactured Housing Institute PAC

A.	Full Name (Last, First, Middle Initial) Manufactured Housing Institute	Transaction ID: 5414950 Date of Disbursement
	Mailing Address 2101 Wilson Blvd., Suite 610	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Error-Deposit Refund	<input type="text" value="6716.83"/>
	Candidate Name	<input type="text" value="008"/> Category/Type
	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) ▼
		Bank Error-Deposit Refund

B.	Full Name (Last, First, Middle Initial) Manufactured Housing Institute	Transaction ID: 5506834 Date of Disbursement
	Mailing Address 2101 Wilson Blvd., Suite 610	<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Error - Deposit Refund	<input type="text" value="9539.99"/>
	Candidate Name	<input type="text" value="008"/> Category/Type
	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) ▼
		Bank Error - Deposit Refund

C.	Full Name (Last, First, Middle Initial) Manufactured Housing Institute	Transaction ID: 5731255 Date of Disbursement
	Mailing Address 2101 Wilson Blvd., Suite 610	<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Error- Deposit Refund	<input type="text" value="16117.98"/>
	Candidate Name	<input type="text" value="008"/> Category/Type
	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) ▼
		Bank Error- Deposit Refund

**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 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)  
Manufactured Housing Institute PAC

A.	Full Name (Last, First, Middle Initial) Wachovia Bank, NA	Transaction ID: 5732327 Date of Disbursement
	Mailing Address 2026 Wilson Blvd.	<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="64.70"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Wachovia Bank, NA	Transaction ID: 5732335 Date of Disbursement
	Mailing Address 2026 Wilson Blvd.	<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="91.43"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Wachovia Bank, NA	Transaction ID: 5732343 Date of Disbursement
	Mailing Address 2026 Wilson Blvd.	<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="67.93"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="224.06"/>
<b>TOTAL</b> 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 27 / 33

<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)  
Manufactured Housing Institute PAC

A.	Full Name (Last, First, Middle Initial) Wachovia Bank, NA	Transaction ID: 5732373 Date of Disbursement																			
	Mailing Address 2026 Wilson 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>0</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	9	/	2	0	0	9												
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>381.44</td></tr></table>	381.44																		
381.44																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Wachovia Bank, NA	Transaction ID: 5734390 Date of Disbursement																			
	Mailing Address 2026 Wilson 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>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	0	9												
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>61.79</td></tr></table>	61.79																		
61.79																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Wachovia Bank, NA	Transaction ID: 5735210 Date of Disbursement																			
	Mailing Address 2026 Wilson 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>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	0	9	/	2	0	0	9												
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>266.79</td></tr></table>	266.79																		
266.79																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>710.02</td></tr></table>	710.02
710.02		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>33308.88</td></tr></table>	33308.88
33308.88		

# 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)  
Manufactured Housing Institute PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mark Pryor for US Senate</p> <p>Mailing Address PO Box 2720</p> <p>City Little Rock State AR Zip Code 72203</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Mark Pryor</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District:</p>	<p><b>Transaction ID:</b> 5443937 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <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>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	6	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	1	6	/	2	0	0	9													
1000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Bennie Thompson</p> <p>Mailing Address P.O. Box 100</p> <p>City Bolton State MS Zip Code 39041</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Bennie Thompson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MS District: 02</p>	<p><b>Transaction ID:</b> 5443938 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <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>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	6	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	1	6	/	2	0	0	9													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ken Calvert for Congress</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Ken Calvert</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 44</p>	<p><b>Transaction ID:</b> 5443939 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <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>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	6	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	1	6	/	2	0	0	9													
1000.00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="border: 1px solid black; padding: 5px;">3000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px;"> </span>

**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 / 33

<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)  
Manufactured Housing Institute PAC

A.	Full Name (Last, First, Middle Initial) Brown-Waite for Congress	Transaction ID: 5443940 Date of Disbursement 09 / 16 / 2009
	Mailing Address 704 Ponce De Leon Blvd	Amount of Each Disbursement this Period 1000.00
	City Brooksville State FL Zip Code 34601	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Virginia Brown-Waite	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lisa Murkowski For Us Senate	Transaction ID: 5443942 Date of Disbursement 09 / 16 / 2009
	Mailing Address PO Box 100847	Amount of Each Disbursement this Period 1000.00
	City Anchorage State AK Zip Code 99510	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Lisa Murkowski	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Roger Wicker for Senate	Transaction ID: 5443945 Date of Disbursement 09 / 16 / 2009
	Mailing Address P.O. Box 874	Amount of Each Disbursement this Period 1000.00
	City Tupelo State MS Zip Code 38802	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Roger Wicker	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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)  
Manufactured Housing Institute PAC

A.	Full Name (Last, First, Middle Initial) Driehaus For Congress  Mailing Address 650 Fox Trails Way  City Cincinnati State OH Zip Code 45233  Purpose of Disbursement  Candidate Name Rep. Steve Driehaus  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5544341 Date of Disbursement 11 / 05 / 2009  Amount of Each Disbursement this Period 2000.00  011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen  Mailing Address P.O. Box 44369 250 Prairie Center Drive  City Eden Prairie State MN Zip Code 55344  Purpose of Disbursement  Candidate Name Rep. Erik Paulsen  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5544342 Date of Disbursement 11 / 05 / 2009  Amount of Each Disbursement this Period 250.00  011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Souder for Congress Inc  Mailing Address 1300 S. Harrison Street # 3105  City Fort Wayne State IN Zip Code 46802  Purpose of Disbursement  Candidate Name Mark Souder  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5581317 Date of Disbursement 11 / 24 / 2009  Amount of Each Disbursement this Period 1000.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3250.00
<b>TOTAL</b> 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)  
Manufactured Housing Institute PAC

**A.** Full Name (Last, First, Middle Initial)  
Barney Frank for Congress Committee

Mailing Address P O Box 260

City State Zip Code  
Newtonville MA 02460

Purpose of Disbursement

Category/  
Type

Candidate Name  
Barney Frank

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MA District: 04

**Transaction ID:** 5581319

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
McHenry for Congress

Mailing Address P.O. Box 360

City State Zip Code  
Cherryville NC 28021

Purpose of Disbursement

Category/  
Type

Candidate Name  
Patrick McHenry

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NC District: 10

**Transaction ID:** 5581320

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Friends of Schumer

Mailing Address 60 Madison Ave Suite 1026

City State Zip Code  
New York NY 10010

Purpose of Disbursement

Category/  
Type

Candidate Name  
Charles Schumer

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District:

**Transaction ID:** 5581321

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**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)

PAGE 32 / 33

<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)  
Manufactured Housing Institute PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends for Baron Hill</p> <p>Mailing Address PO Box 1071</p> <p>City Seymour State IN Zip Code 47274</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Baron Hill</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IN District: 09</p>	<p><b>Transaction ID:</b> 5581322 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">24</span> / <span style="border: 1px solid black; padding: 2px;">2009</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>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Joe Donnelly for Congress</p> <p>Mailing Address 422 C Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Joseph Donnelly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IN District: 02</p>	<p><b>Transaction ID:</b> 5581327 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">24</span> / <span style="border: 1px solid black; padding: 2px;">2009</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>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Duncan for Congress</p> <p>Mailing Address PO Box 2646</p> <p>City Knoxville State TN Zip Code 37901</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name John Duncan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 02</p>	<p><b>Transaction ID:</b> 5581402 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">24</span> / <span style="border: 1px solid black; padding: 2px;">2009</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">2000.00</span></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="border: 1px solid black; padding: 2px; display: block;">4000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block;"> </span>

# 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 33 / 33

<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)  
Manufactured Housing Institute PAC

A.

Full Name (Last, First, Middle Initial)  
Shelby for U S Senate

Mailing Address Post Office Box 1091

City Tuscaloosa State AL Zip Code 35401

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Richard Shelby

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

State: AL District:

Transaction ID: 5599794  
Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)  
Joe Donnelly for Congress

Mailing Address 422 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Joseph Donnelly

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

State: IN District: 02

Transaction ID: 5625564  
Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Friends of Blanche Lincoln

Mailing Address PO Box 3197  
P O Box 118

City Little Rock State AR Zip Code 72203

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Blanche Lincoln

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

State: AR District:

Transaction ID: 5625566  
Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

20750.00