

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
Continuing A Majority Party Action Committee (CAMPAC)

ADDRESS (number and street) 5915 Eastman Avenue Suite 100
Check if different than previously reported. (ACC) Midland MI 48640

2. **FEC IDENTIFICATION NUMBER** C00350462
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 05 01 2008 through 05 31 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 Jacqueline M. Medema
Signature of Treasurer Electronically Filed by Jacqueline M. Medema Date 06 12 2008

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
Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
3	1

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		102961.75
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	223463.02									
(c) Total Receipts (from Line 19)	47184.25	318551.60								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	270647.27	421513.35								
7. Total Disbursements (from Line 31)	8015.03	158881.11								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	262632.24	262632.24								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2500.00									

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
Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
3	1

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	10500.00	51800.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10500.00	51800.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	36500.00	265093.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	47000.00	316893.00
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	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	184.25	658.60
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))	47184.25	318551.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	47184.25	318551.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1015.03	20381.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1015.03	20381.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	7000.00	138500.00
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.....	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))..	8015.03	158881.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8015.03	158881.11

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	47000.00	316893.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47000.00	316893.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1015.03	20381.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1015.03	20381.11

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

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

FOR LINE NUMBER: PAGE 6 / 20

(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)
Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)
JAMES J. FLUHARTY

Mailing Address 229 10TH STREET NE

City State Zip Code
WASHINGTON DC 20002

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

Name of Employer Occupation
CHESAPEAK ENTERPRISES VP GOV'T RELATIONS

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

Date of Receipt

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

Transaction ID: SA11AI.7059

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MASHANTUCKET PEQUOT TRIBAL NATION

Mailing Address PO BOX 3008

City State Zip Code
MASHANTUCKET CT 06339-3008

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.7060

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SAGINAW CHIPPEWA INDIAN TRIBE

Mailing Address 7070 E. Broadway

City State Zip Code
Mt. Pleasant MI 48858

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.7061

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

10500.00

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

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

FOR LINE NUMBER: PAGE 7 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial)
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC
 Mailing Address 1932 WYNNTON ROAD
 City State Zip Code
 COLUMBUS GA 31999
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 8 / 2 0 0 8
Transaction ID: SA11C.7064
 Amount of Each Receipt this Period
 5000.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C** C00034157
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

B. Full Name (Last, First, Middle Initial)
ALLERGAN INC POLITICAL ACTION COMM FOR EMPLOYEES (APACE)
 Mailing Address 2148 E ORANGEVIEW LN
 City State Zip Code
 ORANGE CA 92867
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 3 0 / 2 0 0 8
Transaction ID: SA11C.7076
 Amount of Each Receipt this Period
 3500.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C** C00292102
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE
 Mailing Address 2400 N St NW
 City State Zip Code
 Washington DC 20037
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 8 / 2 0 0 8
Transaction ID: SA11C.7066
 Amount of Each Receipt this Period
 2500.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. **C** C00375360
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00
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 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)
CVS/CAREMARK CORPORATION EMPLOYEES PAC

Mailing Address 9501 East Shea Boulevard
Mail Stop 102

City State Zip Code
Scottsdale AZ 85260

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

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

Transaction ID: SA11C.7068

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 520 S. GRAND AVE. STE. 700

City State Zip Code
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: SA11C.7070

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 1776 EYE STREET NW
Suite 890

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

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

Transaction ID: SA11C.7055

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

9500.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code
Springfield MA 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11C.7052

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 27-01 Queens Plaza North
Area 4D

City State Zip Code
Long Island City NY 11101

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 8 / 2 0 0 8

Transaction ID: SA11C.7072

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MUTUAL OF OMAHA COMPANIES PAC (IMPAC)

Mailing Address Mutual of Omaha Plaza

City State Zip Code
Omaha NE 68175

FEC ID number of contributing federal political committee. **C** C00094581

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11C.7053

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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: PAGE 10 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

Mailing Address 751 Broad Street
3RD FLOOR PRUDENTIAL PLAZA

City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2008
Transaction ID: SA11C.7073
 Amount of Each Receipt this Period 5000.00
 DONATION

B. Full Name (Last, First, Middle Initial)
UBS AMERICAS FUND FOR BETTER GOVERNMENT

Mailing Address C/O PER DYRVIK
400 ATLANTIC STREET

City STAMFORD State CT Zip Code 06901

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2008
Transaction ID: SA11C.7074
 Amount of Each Receipt this Period 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	36500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 20	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A.	Full Name (Last, First, Middle Initial) CHEMICAL BANK & TRUST		Date of Receipt
	Mailing Address 333 E. MAIN STREET		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City MIDLAND	State MI	Zip Code 48640
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA17.7078
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="184.25"/> INTEREST	
Aggregate Year-to-Date ▼		<input type="text" value="658.60"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="184.25"/>
TOTAL This Period (last page this line number only)	<input type="text" value="184.25"/>

**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 12 / 20

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

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NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)
BURNSIDE & LANG, PC

Transaction ID: SB21B.7089
Date of Disbursement

Mailing Address 5915 EASTMAN AVE
SUITE 100

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

City MIDLAND State MI Zip Code 48640

Amount of Each Disbursement this Period

938.54

Purpose of Disbursement
ACCOUNTING FEES

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

938.54

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

938.54

**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)
Continuing A Majority Party Action Committee (CAMPAC)

<p>A. Full Name (Last, First, Middle Initial) GUTHRIE FOR CONGRESS</p> <p>Mailing Address PO BOX 9639</p> <p>City BOWLING GREEN State KY Zip Code 42102</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name STEVEN BRETT GUTHRIE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7085</p> <p>Date of Disbursement 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) HAYES FOR CONGRESS</p> <p>Mailing Address Post Office Box 2000</p> <p>City Concord State NC Zip Code 28026</p> <p>Purpose of Disbursement IN-KIND FUNDRAISING EXPENSES</p> <p>Candidate Name ROBERT C (ROBIN) HAYES</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7095</p> <p>Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM]</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) HELLER FOR CONGRESS</p> <p>Mailing Address 7840 Red Leaf Drive</p> <p>City Las Vegas State NV Zip Code 89131</p> <p>Purpose of Disbursement CONTRIBUTION TO CANDIDATE</p> <p>Candidate Name DEAN HELLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7088</p> <p>Date of Disbursement 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial)
LYLE LARSON FOR CONGRESS

Mailing Address PO BOX 171148

City SAN ANTONIO State TX Zip Code 78217

Purpose of Disbursement CONTRIBUTION TO CANDIDATE

Candidate Name LYLE LARSON

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: TX District: 23

Transaction ID: SB23.7080
Date of Disbursement: 05 / 27 / 2008

Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

B. Full Name (Last, First, Middle Initial)
MUSGRAVE FOR CONGRESS

Mailing Address 257 Johnstown Center Drive #211

City Johnstown State CO Zip Code 80534

Purpose of Disbursement IN-KIND FUNDRAISING EXPENSES

Candidate Name MARILYN MUSGRAVE

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.7097
Date of Disbursement: 05 / 22 / 2008

Amount of Each Disbursement this Period: 500.00

Category/Type: 011

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MUSGRAVE FOR CONGRESS

Mailing Address 257 Johnstown Center Drive #211

City Johnstown State CO Zip Code 80534

Purpose of Disbursement CONTRIBUTION TO CANDIDATE

Candidate Name MARILYN MUSGRAVE

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.7087
Date of Disbursement: 05 / 27 / 2008

Amount of Each Disbursement this Period: 2000.00

Category/Type: 011

SUBTOTAL of Disbursements This Page (optional) ► 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 20

<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)
Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)
SCHOCK FOR CONGRESS

Transaction ID: SB23.7079

Date of Disbursement

Mailing Address PO Box 10555

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

City Peoria State IL Zip Code 61612

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION TO CANDIDATE

011
Category/
Type

Candidate Name
AARON SCHOCK

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 18

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

7000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 / 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEVANTINO GROUP	Nature of Debt (Purpose): IN-KIND-FUND RAISER EXPEN-SES-WALBERG
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	
City State ZIP Code WASHINGTON DC 20007	

Outstanding Balance Beginning This Period 500.00	Transaction ID: SD10.7049	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEVANTINO GROUP	Nature of Debt (Purpose): IN-KIND FUND RAISER EXPEN-SES-BUCHANAN
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	
City State ZIP Code WASHINGTON DC 20007	

Outstanding Balance Beginning This Period 500.00	Transaction ID: SD10.7048	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEVANTINO GROUP	Nature of Debt (Purpose): IN-KIND-FUND RAISER EXPEN-SES-REICHERT
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	
City State ZIP Code WASHINGTON DC 20007	

Outstanding Balance Beginning This Period 500.00	Transaction ID: SD10.7050	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) SUBTOTALS This Period This Page (optional).....	1500.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEVANTINO GROUP	Nature of Debt (Purpose): IN-KIND FUNDRAISING EXPEN- SES-HAYES
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	
City State ZIP Code WASHINGTON DC 20007	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.7096	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEVANTINO GROUP	Nature of Debt (Purpose): IN-KIND FUNDRAISING EXPEN- SES-MUSGRAVE
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	
City State ZIP Code WASHINGTON DC 20007	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.7098	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) SUBTOTALS This Period This Page (optional).....	1000.00
2) TOTALS This Period (last page this line number only).....	2500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2500.00

Image# 28931881811

Form/Schedule: **SB23**

Transaction ID: **SB23.7097**

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE, AND FOOD AND BEVERAGES FOR THE E

Form/Schedule: **SD10**

Transaction ID: **SD10.7049**

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE AND FOOD AND BEVERAGES FOR EVENT

Image# 28931881812

Form/Schedule: **SD10**
Transaction ID: **SD10.7048**

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE AND FOOD AND BEVERAGES FOR EVENT

Form/Schedule: **SD10**
Transaction ID: **SD10.7050**

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE AND FOOD AND BEVERAGES FOR EVENT

Image# 28931881813

Form/Schedule: SD10

Transaction ID: SD10.7096

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE, AND FOOD AND BEVERAGES FOR THE E
