

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

National Funeral Directors Association of the United States Inc

ADDRESS (number and street)

13625 Bishops Drive

☐Check if different  
than previously  
reported. (ACC)

Brookfield

WI

53005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00204008

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 0

0 1

2 0 0 9

through

1 2

3 1

2 0 0 9

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

Randall L. Earl, CFSP

Signature of Treasurer

Electronically Filed by Randall L. Earl, CFSP

Date

0 1

1 5

2 0 1 0

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

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

National Funeral Directors Association of the United States Inc

Report Covering the Period:

From:

M	M
1	0

D	D
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	2009	32629.72
(b) Cash on Hand at Beginning of Reporting Period .....	24669.72	
(c) Total Receipts (from Line 19) .....	26325.00	72865.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	50994.72	105494.72
7. Total Disbursements (from Line 31) .....	8500.00	63000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	42494.72	42494.72
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

National Funeral Directors Association of the United States Inc

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
1	0	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
1	2	0	3	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) .....	8285.00	27385.00
(ii) Unitemized .....	18040.00	45480.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26325.00	72865.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	26325.00	72865.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	26325.00	72865.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26325.00	72865.00

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	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.....	8500.00	61000.00	
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	2000.00	
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))..	8500.00	63000.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8500.00	63000.00	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	26325.00	72865.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26325.00	72865.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Joseph F Ambrose, Sr

Mailing Address 5515 Osage Ave

City

Baltimore

State

MD

Zip Code

21227-2634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Funeral Director

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 1 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.13892

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Bob Arrington

Mailing Address 10 Winchester Cove

City

Jackson

State

TN

Zip Code

38305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arrington Funeral Directo-  
rs

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.13896

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mark J Benson

Mailing Address 1111 25th Ave S

City

Saint Cloud

State

MN

Zip Code

56301-4833

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benson Funeral Home

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.13907

Amount of Each Receipt this Period

100.00

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

550.00

**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 7 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

John C Carmon

Mailing Address PO Box 6

City

Windsor

State

CT

Zip Code

06095-0006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carmon Community Funeral  
Homes

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.14186

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Deborah M Cooney

Mailing Address PO Box 22

City

Woodstock

State

IL

Zip Code

60098-0022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schneider-Leucht-Merwin-C-  
ooney

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.13948

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Leon DeLeon

Mailing Address PO Box 125

City

San Juan

State

TX

Zip Code

78589-0125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Memorial Funeral Home

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.14004

Amount of Each Receipt this Period

100.00

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

450.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Emilie Duhaime

Mailing Address 35 Bellevue Ave

City

Bristol

State

CT

Zip Code

06010-5815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Funk Funeral Home

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

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

Transaction ID: SA11AI.13972

Amount of Each Receipt this Period

290.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Fowler

Mailing Address PO Box 1530

City

Spartanburg

State

SC

Zip Code

29304-1530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The J F Floyd Mortuary

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.13998

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Scott Fowler

Mailing Address PO Box 1530

City

Spartanburg

State

SC

Zip Code

29304-1530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The J F Floyd Mortuary

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.14073

Amount of Each Receipt this Period

200.00

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

590.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Scott Fowler

Mailing Address PO Box 1530

City

Spartanburg

State

SC

Zip Code

29304-1530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The J F Floyd Mortuary

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11AI.14074

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

L Ruple Harley, Jr

Mailing Address PO Box 777

City

Greenwood

State

SC

Zip Code

29648-0777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harley F H & Crematory

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.14016

Amount of Each Receipt this Period

120.00

**C.**

Full Name (Last, First, Middle Initial)

Terry Harmon

Mailing Address PO Box 637

City

Monrovia

State

CA

Zip Code

91017-0637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Douglass & Zook Mortuary  
Inc

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

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

Transaction ID: SA11AI.14019

Amount of Each Receipt this Period

400.00

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

720.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

William G Harris

Mailing Address 500 Cherry Ln

City

Johnstown

State

PA

Zip Code

15904-2647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harris Funeral Home

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.14023

Amount of Each Receipt this Period

175.00

**B.**

Full Name (Last, First, Middle Initial)

John J Hogan, Jr

Mailing Address 4751 Parsons Blvd

City

Flushing

State

NY

Zip Code

11355-2328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fogarty Funeral Home

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.14030

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mark A Knudsen

Mailing Address 1457 Brampton Cove

City

Wellington

State

FL

Zip Code

33414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: SA11AI.14050

Amount of Each Receipt this Period

475.00

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

1650.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

J Michael Krill

Mailing Address PO Box 549

City

Edgerton

State

OH

Zip Code

43517-0546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Krill Funeral Service

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.14054

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

Albert T McGahan

Mailing Address 315 2nd St NW

City

Sidney

State

MT

Zip Code

59270-3933

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fulkerson FH

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.14070

Amount of Each Receipt this Period

175.00

**C.**

Full Name (Last, First, Middle Initial)

Patrica A Moore

Mailing Address 1591 Alps Rd

City

Wayne

State

NJ

Zip Code

07470-3641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Moore's Home for Funerals

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.14082

Amount of Each Receipt this Period

500.00

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

1075.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Patrica A Moore

Mailing Address 1591 Alps Rd

City

Wayne

State

NJ

Zip Code

07470-3641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Moore's Home for Funerals

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

MM / DD / YYYY  
11 / 19 / 2009

Transaction ID: SA11AI.14085

Amount of Each Receipt this Period

155.00

**B.**

Full Name (Last, First, Middle Initial)

Margaret M Nolan

Mailing Address 536 Broad St Ste 2

City

Weymouth

State

MA

Zip Code

02189-1395

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Massachusetts FDA

Occupation

Executive Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
11 / 12 / 2009

Transaction ID: SA11AI.14098

Amount of Each Receipt this Period

145.00

**C.**

Full Name (Last, First, Middle Initial)

Robert E Parks

Mailing Address 232 Calhoun St

City

Charleston

State

SC

Zip Code

29401-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J Henry Stuhr Inc

Occupation

Funeral Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
11 / 04 / 2009

Transaction ID: SA11AI.14107

Amount of Each Receipt this Period

500.00

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Robert E Parks

Mailing Address 232 Calhoun St

City

Charleston

State

SC

Zip Code

29401-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J Henry Stuhr Inc

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.14108

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Raymond F Pistey

Mailing Address 2155 Main St

City

Stratford

State

CT

Zip Code

06615-6301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pistey Funeral Home Inc

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11AI.14112

Amount of Each Receipt this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)

Brent E Shain

Mailing Address P.O. Box 40

City

Hugo

State

OK

Zip Code

74743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.14141

Amount of Each Receipt this Period

275.00

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Courtne Tidwall

Mailing Address 411 Dewey Ave

City

Poteau

State

OK

Zip Code

74953-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Evans & Miller Funeral Ho-  
me

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.14164

Amount of Each Receipt this Period

210.00

**B.**

Full Name (Last, First, Middle Initial)

Robert F Vandenberg

Mailing Address 59302 Glacier Club Drive

City

Washington

State

MI

Zip Code

48094

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.14166

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Jeff Wilson

Mailing Address 1278 Park Ave

City

Cranston

State

RI

Zip Code

02910-3021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nardolillo Funeral Home  
Inc

Occupation

Funeral Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.14178

Amount of Each Receipt this Period

100.00

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

410.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

**A.**

Full Name (Last, First, Middle Initial)

Thomas P Zizos

Mailing Address 6512 Crain Hwy

City

Bowie

State

MD

Zip Code

20715-4325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beall Funeral Home

Occupation

Funeral Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

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

Transaction ID: SA11AI.14182

Amount of Each Receipt this Period

1440.00

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

1440.00

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

8285.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 / 18

<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)

National Funeral Directors Association of the United States Inc

<b>A.</b> Full Name (Last, First, Middle Initial) JOHN H. ADLER	<b>Transaction ID:</b> SB23.13884 <b>Date of Disbursement</b>																				
Mailing Address 61 Cameo Dr	<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>3</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		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	9												
City Cherry Hill State NJ Zip Code 08003	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name ADLER FOR CONGRESS	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) ARCURI FOR CONGRESS	<b>Transaction ID:</b> SB23.13876 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 8508	<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>2</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	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	9												
City Utica State NY Zip Code 13505	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) BILL SHUSTER FOR CONGRESS	<b>Transaction ID:</b> SB23.13878 <b>Date of Disbursement</b>																				
Mailing Address PO Box 27	<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>2</td><td>8</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		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	9												
City Hollidaysburg State PA Zip Code 16648	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

4000.00

**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 17 / 18

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)

JOSEPH D COURTNEY

Mailing Address PO BOX 1372

City  
VERNON

State  
CT

Zip Code  
06066

Purpose of Disbursement

Candidate Name  
COURTNEY FOR CONGRESS

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CT District: 02

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.13887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

DUNCAN D. HUNTER FOR CONGRESS

Mailing Address 9340 Fuerte Drive Suite 302

City  
La Mesa

State  
CA

Zip Code  
91941

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 52

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.13880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 Dixie Highway  
Suite F

City  
Erlanger

State  
KY

Zip Code  
41018

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KY District: 04

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.13882

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 18 / 18

<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)

National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)

MURTHA FOR CONGRESS COMMITTEE

Mailing Address Suite 120, 551 Main Street  
BT FINANCIAL PLAZA SUITE 220

City JOHNSTOWN State PA Zip Code 15901

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 12

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.13883

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

1500.00

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

8500.00