02/12/2008 00:19

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Othe	r Than An	Authorize	d Committ	tee		Office Us	se Only	
NAME OF COMMITTEE (in full)		MAILING LAE OR PRINT 🗑		ample:If typing er the lines	g, type		• • • • •		
American Nurses Associatio	n PAC					1 1 1			
	1 1 1							1 1 1	
ADDRESS (number and street)	8515 G Suite 40	eorgia Avenue						1 1 1	
Check if different than previously reported. (ACC)	Silver S	pring				MD	2	0910	3492
2. FEC IDENTIFICATION NUM	/IBER ≒	, 	CITY 🛕			STATE	l .	ZIPCODE	A
C00017525			3. IS THIS REPORT		NEW (N) OR	X	AMENDED (A)		
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Compared on the content of the content on th	(c) (d) (d)	12-Day PRE-Electic Report for the state of t	Election on		(12C)	Spe	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) eral (12G) cial (12G) off (30R)	in the State of	Nov 20 (M11) Non-Election Year Only) Dec 20 (M12) Non-Election Year Only) Idan 31 (YE) Runoff (12R) Special (30S)
5. Covering Period 0	6 01	200	7	through	0 6	3 0	2007		
I certify that I have examined this Type or Print Name of Treasurer		o the best of n Behrens	ny knowledge	and belief it is	true, correct	and comp	olete.		
Signature of Trouburo.	nically Filed					Date	02 12		008
NOTE : Submission of false, erro	neous, or in	complete infor	mation may s	ubject the pers	on signing th	is Report	to the penalties	of 2 U.S.0	2 437g.
Office Use							FEC	FORM	

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Nurses Association PAC D D [®] D 0 6 2007 0 1 2007 0.6 3 0 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand Ž007 81815.99 January 1 (b) Cash on Hand at 151345.17 Begining of Reporting Period 25424.55 277395.65 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 176769.72 359211.64 6(a) and 6(c) for Column B) 27140.28 209582.20 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 149629.44 149629.44 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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) Page 3

Write or Type Committee Name
American Nurses Association PAC

	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)	470.00	18486.00
	(ii) Unitemized	24634.00	258516.95
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	25104.00	277002.95
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	25104.00	277002.95
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
4. 5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	-886.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	320.55	1278.70
8.	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
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	25424.55	277395.65
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	25424.55	277395.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expendit (a) Shared Federa 			
Activity (from S	Schedule H4)	0.00	0.00
(i) Federal S	hare		
\ /	eral Share	0.00	0.00
(b) Other Federal	Operating	1140.28	10757.20
(c) Total Operatin			
	a)(ii) and (b))	1140.28	10757.20
Transfers to Affiliat Committees	ed/Other Party	0.00	0.00
Contributions to	/Committees		
and Other Political	Committees	26000.00	198000.00
 Independent Expen (use Schedule E) 		0.00	0.00
Coordinated Expen Committees (2 U.S	ditures Made by Party .C. 441a(d))	0.00	0.00
(use Schedule F)		0.00	0.00
6. Loan Repayments	Made	0.00	0.00
7 Loans Made		0.00	0.00
8. Refunds of Contrib (a) Individuals/Pe	utions To:		
	Committees	0.00	825.00
(b) Political Party	Committees	0.00	0.00
(c) Other Political		0.00	0.00
(d) Total Contribu	s)tion Refunds		0.00
(add Lines 28)	a), (b), and (c))	0.00	825.00
9. Other Disbursemer	nts	0.00	0.00
0. Federal Election A	ctivity (2 U.S.C 431(20))		
(a) Shared Federa	l Election Activity		
(from Schedule	e H6) are	0.00	0.00
		2.22	0.00
	are	0.00	0.00
* *	n Activity Paid Entirely unds	0.00	0.00
(c) Total Federal E	Election Activity (add	0.00	0.00
	, 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursemen	ts (add Lines 21(c), 22,		
23, 24, 25, 26, 27,	28(d), 29 and 30(c))	27140.28	209582.20
Total Federal Disb	ursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)		27140.28	209582.20

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	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)	25104.00	277002.95
34.	Total Contribution Refunds (from Line 28(d))	0.00	825.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	25104.00	276177.95
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1140.28	10757.20
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1140.28	10757.20

FE6AN026

SCHEDULE A (FEC Form 3X)

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) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Nurses Association PAC	atements may not be sold or used by any personame and address of any political committee to	
Full Name (Last, First, Middle Initial) Ms. Marinetta H. Van Lahr Mailing Address Rt 1 Box 134a City Webster FEC ID number of contributing federal political committee. Name of Employer DR ROBERT CHABLISS,MD Receipt For: Primary General Other (specify)	State Zip Code KY 40176-9801 C Occupation FAMILY NURSE PRACTIONER Aggregate Year-to-Date 400.00	Date of Receipt M M O D D D D D D D D D D D D D D D D D
Full Name (Last, First, Middle Initial) Ms. Lorilee R Stutte Mailing Address 2333 Daystar Ln City Oconomowoc FEC ID number of contributing federal political committee. Name of Employer Cardinal Strich University Receipt For: Primary General Other (specify)	State Zip Code WI 53066 C Occupation Assistant Professor Aggregate Year-to-Date 300.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: A42BA4B51B97D4FA9B Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Ms. Sharon Rainer Mailing Address 221 Union St City Moorestown FEC ID number of contributing federal political committee. Name of Employer NJSNA Receipt For: Primary General Other (specify)	State Zip Code NJ 08057-2339 C Occupation RN Aggregate Year-to-Date 300.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: A4B1E9CDF3593446B9 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional)		320.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 18 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers le name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Nurses Association PAC Full Name (Last, First, Middle Initial) Ms. Carolyn B Yucha		Date of Receipt
Mailing Address 3842 NW 68th Place		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Ga</u> inesville	State Zip Code FL 32653	Transaction ID: A5000469CE8254054859 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer University of Florida;Col- lege of Nursi Receipt For:	Occupation Associate Professor Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Ms. Anne Lucero Mailing Address 406 Baltusrol Dr		Date of Receipt
	State Zip Code	06 28 2007
City Aptos	CA 95003-5408	Transaction ID: A1AC1F9E2933D4F4387 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Cabrille College	Occupation Professor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Ms. Pamela F Cipriano, Phd, Rn, F		Date of Receipt
Mailing Address 512 Rosemont Dr		06 28 2007
City Charlottesville	State Zip Code VA 22903-7694	Transaction ID: A20BF876EC0574121B0
FEC ID number of contributing federal political committee.	C 22305-7694	Amount of Each Receipt this Period 100.00
Name of Employer UVA Health System	Occupation Chief Clinical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL TIL D. 1.14	er only)	470.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 18 (check only one) 11a 11b 11c 12 13 14 15 16 🔀 17
Any information copied from such Reports and States or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) American Nurses Association PAC		
Full Name (Last, First, Middle Initial) Sun Trust Bank Mailing Address PO Box 622227		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Orlando</u>	State Zip Code FL 32862-2227	Transaction ID: AD0FA7A8B31594492978 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	271.45
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1212.93	

SUBTOTAL of Receipts This Page (optional)	•	271.45
TOTAL This Period (last page this line number only)	•	271.45

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	NAME OF COMMITTEE (In Full) American Nurses Association PAC												
	Full Name (Last, First, Middle Initial) Bank of America						Date o	of Dis	burser	ment			D41BB9
	Mailing Address PO Box 27025						o ^M 6	M /	^D 3	0 /	Y 2	o ŏ	7 ^Y
	City Richmond	State VA	Zip Code 23261				Amou	nt of	Each [Disburs	-		
	Purpose of Disbursement bank fees						L					475.0)2
	Candidate Name				tegory/ Type								
	Senate President	Primary Other (spe	General ecify) ▼										
	State: District: Full Name (Last, First, Middle Initial) Sun Trust Bank c/oNOVA Regions Bank Montgomery							of Dis	burser	ment			374A9DB
	Mailing Address 7300 Chapmans Hwy							M /	^D 3	0 ′	Y 2	o ŏ	7 ^Y
	City KNoxville	State TN	Zip Code 37920				Amou	nt of	Each [Disburs	emer	t this	Period
	Purpose of Disbursement credit card fees						L.					82.6	9
	Candidate Name				tegory/ Гуре								
	Office Sought: House Disburs Senate President State: District:	Primary Other (spe	General ecify) ▼										
-	Full Name (Last, First, Middle Initial) Sun Trust Bank								on ID: sburser		AEC	D41 <i>A</i>	A5491C9
	Mailing Address PO Box 622227						0 ^M 6	M /	^D 3	0 /	Y	o ŏ	7 ^Y
	City Orlando	State FL	Zip Code 32862-2227				Amou	nt of	Each [Disburs	emer	t this	Period
	Purpose of Disbursement bank fees				<u></u>	-			_	510.9	93		
	Candidate Name				tegory/ Type								
	Office Sought: House Disburs Senate President	Primary Other (spe	General ▼										
	State: District:		•										

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X)

		Use separate schedule(s	3)	(check			in.		FAGL	= 10/1	10
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21l 27	Ĺ	22 28a	X 23 28b	\vdash	24 28c	25 29	26 30l
	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)										5
V	American Nurses Association PAC										
	Full Name (Last, First, Middle Initial) Sestak For Congress Mailing Address PO Box 16						of Disbur	sement	t	E748C Ž 0 Ŏ 7	
	City Medina	State Zip Code PA 19063				Amou	unt of Eac	h Disb	urseme	nt this F	Period
	Purpose of Disbursement				1	L.			-	1000.0	0
	Candidate Name Joe Sestak			ategory/ Type	1						
		sement For: 2008 ⟨ Primary General Other (specify) ▼	•								
	Full Name (Last, First, Middle Initial) LAMPSON FOR CONGRESS					Date	saction II of Disbur	sement	t	5D25A	_
	Mailing Address 38 Ivy St SE					0 6		19		2007	
	City Washington Purpose of Disbursement	State Zip Code DC 20003	I		1	Amou	unt of Eac	h Disb		nt this F	
	Candidate Name Nick V. Lampson			ategory/ Type							
		sement For: 2008 C Primary General Other (specify)	-	71							
	Full Name (Last, First, Middle Initial) JIM RAMSTAD VOLUNTEER COMMITTI	=					saction II of Disbur	sement	t		
	Mailing Address 1809 Plymouth Rd S #3	10				0 ^M 6	M / D	18	Y	ž 0 ŏ 7	, ^Y
	City Minnetonka	State Zip Code MN 55305				Amou	unt of Eac	h Disb	urseme	nt this F	Period
	Purpose of Disbursement				1	L.				1000.0	0
	Candidate Name Rep. Jim M. Ramstad			ategory/ Type							
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	EMIZED DISBURSEMENTS	for each car	ite schedule(s) tegory of the immary Page	FOR LINE (check only		PAGE 11 / 18		
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	y Information copied from such Reports and State for commercial purposes, other than using the na							
$\overline{\ }$	NAME OF COMMITTEE (In Full)							
/	American Nurses Association PAC							
	Full Name (Last, First, Middle Initial) Friends Of Jim Marshall				Transaction ID: B	DDBE926ACE10491F		
	Mailing Address 586 Orange St				06 / 19	2007		
	City Macon		Zip Code 31201		Amount of Each D	isbursement this Period		
	Purpose of Disbursement					1000.00		
	Candidate Name Rep. Jim C. Marshall			Category/ Type				
		sement For: X Primary Other (specif	2008 General					
	State: GA District: 08	(0)						
-	Full Name (Last, First, Middle Initial) PETER DEFAZIO FOR CONGRESS		Date of Disbursem	BD0C8050BD9C45F1 ent				
	Mailing Address PO Box 1316				06 08	2007		
	City Springfield		Zip Code 97477		Amount of Each D	isbursement this Period		
	Purpose of Disbursement			-		1000.00		
	Candidate Name Rep. Peter A. DeFazio			Category/ Type				
	·	Sement For: X Primary Other (specif	2008 General fy) ▼					
	Full Name (Last, First, Middle Initial)				Transaction ID: B	4421639625D34BD0		
	Committee to Elect Chris Murphy				Date of Disbursem	ent		
	Mailing Address PO Box 127				06	² 2 0 0 7 ³		
	City Cheshire		Zip Code 06410		Amount of Each D	isbursement this Period		
	Purpose of Disbursement					1000.00		
	Candidate Name Rep. Christopher S. Murphy			Category/ Type				
	Senate President	x Primary Other (specif	2008 General					
	State: CT District: 05							
s	UBTOTAL of Disbursements This Page (optional	l))		3000.00		
Т	OTAL This Period (last page this line number on	ly))	<u> </u>			
:E6	SAN026				FEC Schedule	B (Form 3X) (Revised 0		

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			(check onl	NUMBER: PAGE 12 / 1 y one)				
		Detailed S	Summary Page		21b 27	22 28a	X 23 28b	24 28c	25 29	26 30
ny Information copied from such Re r for commercial purposes, other tha										
NAME OF COMMITTEE (In Full) American Nurses Associatio										
Full Name (Last, First, Middle Initi BOSWELL FOR CONGRES							saction ID	: BCAFA	3BB9E5	5264308
Mailing Address PO Box 62	20					0 ^M 6	M / D	08 /	žoŏ	7 ^Y
City Des Moines	St I <i>F</i>	ate \	Zip Code 50309			Amou	unt of Eac	h Disburse		
Purpose of Disbursement						L.			1000.	00
Candidate Name Rep. Leonard L. Boswell	Diahuraan	out For	2000		tegory/ Гуре					
Office Sought: X House Senate President		ent For: Primary Other (spe	2008 General							
State: IA District: 03 Full Name (Last, First, Middle Initial Control of Con	,					Trans	saction IE): B4C32	4BDFCE	34E431
Friends of Congressman Ge Mailing Address PO Box 58							of Disburs	sement	ž o o	7 ^Y
City Concord		ate A	Zip Code 94524			Amou	int of Eac	h Disburse	ement this	
Purpose of Disbursement									1000.	00
Candidate Name Rep. George Miller					tegory/ Гуре					
Office Sought: X House Senate President State: CA District: 07		ent For: Primary Other (spe	2008 General cify)							
Full Name (Last, First, Middle Initi Mike Honda For Congress	al)					Date	of Disburs	: BBA23 sement		
Mailing Address PO Box 81	80					0 ^M 6	M / D	29	ŽOŎ	7 Y
City San Jose		ate A	Zip Code 95155			Amou	unt of Eac	h Disburse		
Purpose of Disbursement	Purpose of Disbursement					L.			1000.	00
Candidate Name Rep. Mike M. Honda					tegory/ Γype					
Office Sought: X House Senate President		ent For: Primary Other (spe	2008 General							
State: CA District: 15										
							-		3000.	

ry Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (In Full) American Nurses Association PAC Full Name (Last, First, Middle Initial) Zack Space For Congress Mailing Address 714 N Wooster Ave City State Zip Code Dover OH 44622 Purpose of Disbursement Candidate Name President State: OH District: 18 Full Name (Last, First, Middle Initial) State: OH District: 18 Full Name (Last, First, Middle Initial) State: OH District: 18 Full Name (Last, First, Middle Initial) State: OH District: 18 Full Name (Last, First, Middle Initial) State: OH District: 18 Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS Mailing Address 8456 Grand Ave City State Zip Code Elmhurst NY 11373 Purpose of Disbursement Candidate Name President Senate President Sonate President So	CHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(for each category of the Detailed Summary Page	(check onl	E NUMBER: ly one) 22 X 23 28a 28b	PAGE 13 / 18 24
Ammerican Nurses Association PAC Full Name (Last, First, Middle Initial) Zack Space For Congress Mailing Address 714 N Wooster Ave City			ed by any person	for the purpose of solic	iting contributions
Amount of Each Disbursement Category State Zip Code OH 44622	NAME OF COMMITTEE (In Full)	to and address of any pointe	ar committee to se	more contributions from	3ucii committee
Mailing Address 714 N Wooster Ave City State Zip Code OH 44622 Purpose of Disbursement Candidate Name Zachary T. Space Office Sought: X House President District: 18 Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS Mailing Address 8456 Grand Ave City State NY 11373 Purpose of Disbursement Candidate Name Rep. Joseph Crowley Office Sought: X Primary General Other (specify) ▼ Transaction ID: B36DAFEC7254D4EI Date of Disbursement this Period Of 6 M 0 0 8 1 2 0 0 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,				
Dover OH 44622 Purpose of Disbursement Candidate Name Zachary T. Space Office Sought:	Mailing Address 714 N Wooster Ave			$0^{M}6^{M}$ / $2^{D}9$	y 2007
Cardidate Name Zachary T. Space Office Sought:	•			Amount of Each Dis	sbursement this Period
Zachary T. Space Office Sought:	Purpose of Disbursement		•		1000.00
Senate President State: OH District: 18 Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS Mailing Address 8456 Grand Ave City State Zip Code NY 11373 Purpose of Disbursement Candidate Name Rep. Joseph Crowley Office Sought: X House Senate President State: NY District: 07 Full Name (Last, First, Middle Initial) Betty Sutton For Congress Mailing Address 1700 W Market St #155 City State Zip Code OH 44313 Purpose of Disbursement Category/ Type Other (specify) ▼ Transaction ID: B36DAFEC7254D4EI Date of Disbursement this Period Category/ Type Transaction ID: B36DAFEC7254D4EI Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: B36DAFEC7254D4EI Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: B36DAFEC7254D4EI Date of Disbursement this Period Amount of Each Disbursement Transaction ID: B36DAFEC7254D4EI Date of Disbursement this Period Category/ Type City State Zip Code OH 44313 Purpose of Disbursement Candidate Name Betty Sutton Office Sought: X House Senate President Disbursement For: 2008 X Primary General Other (specify) ▼ Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: X Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS Mailing Address 8456 Grand Ave City Elmhurst Purpose of Disbursement Candidate Name Rep. Joseph Crowley Office Sought: X House President State: NY District: 07 Full Name (Last, First, Middle Initial) Betty Sutton For Congress Mailing Address 1700 W Market St #155 City Akron Office Sought: X House Category/ Akron Office Sought: X House Category/ Category/ Type Transaction ID: B36DAFEC7254D4El Date of Disbursement Initial Disbursement Initial Disbursement Initial Disbursement Transaction ID: B65948A6FB2CB44B Date of Disbursement Mailing Address 1700 W Market St #155 City Akron OH 44313 Purpose of Disbursement Candidate Name Betty Sutton Office Sought: X House Senate President Disbursement For: 2008 Category/ Type Amount of Each Disbursement Initial Disbursement Ini	Senate X President	Primary Genera	1		
City State Zip Code NY 11373 Purpose of Disbursement Candidate Name Rep. Joseph Crowley Office Sought: X House Senate President Mailing Address 1700 W Market St #155 City State Zip Code OH 13373 Amount of Each Disbursement this Period 1000.00 Transaction ID: B65948A6FB2CB44B Date of Disbursement Mailing Address 1700 W Market St #155 City State Zip Code OH 44313 Purpose of Disbursement Candidate Name Betty Sutton Office Sought: X House Senate President Disbursement For: 2008 X Primary General Other (specify) ▼ Category/ Type Category/ Type Office Sought: X House Senate President Other (specify) ▼ Category/ Type	Full Name (Last, First, Middle Initial)				
Elmhurst Purpose of Disbursement Candidate Name Rep. Joseph Crowley Office Sought:					
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