

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
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

ADDRESS (number and street) 333 S. WABASH
43-S
 Check if different than previously reported. (ACC)
CHICAGO IL 60604

2. **FEC IDENTIFICATION NUMBER** C00078287
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 2008 through 09 30 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 Karen E. Melchert

Signature of Treasurer Electronically Filed by Karen E. Melchert Date 10 21 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									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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		25248.23
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	28691.78									
(c) Total Receipts (from Line 19)	17105.78	84987.79								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45797.56	110236.02								
7. Total Disbursements (from Line 31)	40552.00	104990.46								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5245.56	5245.56								
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**

Write or Type Committee Name
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	12893.82	49104.68
(i) Itemized (use Schedule A)	4211.96	35883.11
(ii) Unitemized	17105.78	84987.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17105.78	84987.79
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))	17105.78	84987.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17105.78	84987.79

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	52.00	190.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	52.00	190.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	72800.00
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.....	21500.00	32000.00
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))..	40552.00	104990.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40552.00	104990.46

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)	17105.78	84987.79
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17105.78	84987.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52.00	190.46
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52.00	190.46

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Michael Anway

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.53

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15373

Amount of Each Receipt this Period 162.51

Contribution

B. Full Name (Last, First, Middle Initial)
Daniel Auslander

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15328

Amount of Each Receipt this Period 125.01

Contribution

C. Full Name (Last, First, Middle Initial)
Darci Beacom

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15329

Amount of Each Receipt this Period 125.01

Contribution

SUBTOTAL of Receipts This Page (optional) 412.53

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 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
Jeffrey Becker

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Insurance Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
308.35

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15330

Amount of Each Receipt this Period

125.01

Contribution

B.

Full Name (Last, First, Middle Initial)
Jacquelyne Belcastro

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
375.03

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15331

Amount of Each Receipt this Period

125.01

Contribution

C.

Full Name (Last, First, Middle Initial)
John Bloedorn

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15267

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

325.02

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 9 / 51
	<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Larry Boysen		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15374
Name of Employer CNA		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 562.50	187.50
Contribution			

B.	Full Name (Last, First, Middle Initial) Patty Bridger		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15375
Name of Employer CNA Insurance		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 562.50	187.50
Contribution			

C.	Full Name (Last, First, Middle Initial) Nancy Bufalino		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60604
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15332
Name of Employer CNA		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.03	125.01
Contribution			

SUBTOTAL of Receipts This Page (optional)	500.01
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 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
James Casimir

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15333

Amount of Each Receipt this Period
125.01

Contribution

B.

Full Name (Last, First, Middle Initial)
John Ciabattoni

Mailing Address 333 S. Wabash

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15334

Amount of Each Receipt this Period
125.01

Contribution

C.

Full Name (Last, First, Middle Initial)
Bruce Cluskey, q

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15335

Amount of Each Receipt this Period
125.01

Contribution

SUBTOTAL of Receipts This Page (optional) ► **375.03**

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 11 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Michael Coffey

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15320
Amount of Each Receipt this Period: 78.00
Contribution

B. Full Name (Last, First, Middle Initial)
Charles Colburn

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15336
Amount of Each Receipt this Period: 125.01
Contribution

C. Full Name (Last, First, Middle Initial)
Terry Cosgrove

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15337
Amount of Each Receipt this Period: 125.01
Contribution

SUBTOTAL of Receipts This Page (optional) ► 328.02

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 12 / 51
	<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Kathleen Cunning		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15376
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CNA Insurance		Occupation Executive	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 562.50	
		<input type="text"/> 187.50	

B.	Full Name (Last, First, Middle Initial) Heather Davis		Date of Receipt
	Mailing Address 333 S. Wabash 43rd Floor		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60604
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15377
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CNA		Occupation Executive Director	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 562.50	
		<input type="text"/> 187.50	

C.	Full Name (Last, First, Middle Initial) Jeffrey Day		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15268
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CNA Insurance		Occupation Executive	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 255.00	
		<input type="text"/> 75.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 450.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
John Devereux
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00
 Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15371
 Amount of Each Receipt this Period 150.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Nicholas Diacou
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00
 Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15269
 Amount of Each Receipt this Period 75.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Bonnie Diehl
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNA Insurance Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00
 Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15270
 Amount of Each Receipt this Period 75.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Thomas Dunlop		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza		Transaction ID: SA11AI.15271		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer CNA	Occupation Executive	Aggregate Year-to-Date 225.00		

B.	Full Name (Last, First, Middle Initial) Steven Earley		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza		Transaction ID: SA11AI.15272		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer CNA	Occupation Executive	Aggregate Year-to-Date 225.00		

C.	Full Name (Last, First, Middle Initial) Warren Edwards		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza		Transaction ID: SA11AI.15338		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 125.01	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer CNA	Occupation Executive	Aggregate Year-to-Date 375.03		

SUBTOTAL of Receipts This Page (optional)

275.01

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 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
George Fay

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.06

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: SA11AI.15389

Amount of Each Receipt this Period
250.02

Contribution

B.

Full Name (Last, First, Middle Initial)
Diane Ferro

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: SA11AI.15339

Amount of Each Receipt this Period
125.01

Contribution

C.

Full Name (Last, First, Middle Initial)
Michael Fitzgerald

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: SA11AI.15378

Amount of Each Receipt this Period
187.50

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **562.53**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
Brian Frankl

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15274

Amount of Each Receipt this Period 75.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Fred Garrett

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15275

Amount of Each Receipt this Period 75.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Jamie Gibbins

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15276

Amount of Each Receipt this Period 75.00

Contribution

SUBTOTAL of Receipts This Page (optional) 225.00

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 17 / 51		
	<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

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Pamela Gillette			Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza			Transaction ID: SA11AI.15277		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 75.00		
	FEC ID number of contributing federal political committee. C			Contribution		
	Name of Employer CNA Insurance		Occupation Executive	Aggregate Year-to-Date 225.00		

B.	Full Name (Last, First, Middle Initial) Brian Granstrand			Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza			Transaction ID: SA11AI.15279		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 75.00		
	FEC ID number of contributing federal political committee. C			Contribution		
	Name of Employer CNA		Occupation Executive	Aggregate Year-to-Date 225.00		

C.	Full Name (Last, First, Middle Initial) Robert Grob			Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza			Transaction ID: SA11AI.15281		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 75.00		
	FEC ID number of contributing federal political committee. C			Contribution		
	Name of Employer CNA		Occupation Executive	Aggregate Year-to-Date 225.00		

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Lynn Gugenheim
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50
 Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15379
 Amount of Each Receipt this Period 187.50
 Contribution

B. Full Name (Last, First, Middle Initial)
Timothy Hagen
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03
 Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15340
 Amount of Each Receipt this Period 125.01
 Contribution

C. Full Name (Last, First, Middle Initial)
Timothy Haggerty
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00
 Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15282
 Amount of Each Receipt this Period 75.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 387.51
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 19 / 51
	<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Gary Hall		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15369
Name of Employer CNA Insurance		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 126.00
		<input type="text"/> 378.00	Contribution

B.	Full Name (Last, First, Middle Initial) John Hall		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15321
Name of Employer CNA Insurance		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 90.00
		<input type="text"/> 270.00	Contribution

C.	Full Name (Last, First, Middle Initial) John Hanrahan		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15283
Name of Employer CNA Insurance		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 225.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 291.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
Dennis Hemme

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15380

Amount of Each Receipt this Period 187.50

Contribution

B.

Full Name (Last, First, Middle Initial)
John Hennessy

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15284

Amount of Each Receipt this Period 75.00

Contribution

C.

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

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15285

Amount of Each Receipt this Period 75.00

Contribution

SUBTOTAL of Receipts This Page (optional) 337.50

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 21 / 51
	<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) John Holtrup		Date of Receipt
	Mailing Address 333 S. Wabash		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60604
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15341
Name of Employer CNA		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 125.01
		<input type="text"/> 208.35	Contribution

B.	Full Name (Last, First, Middle Initial) Jacqueline Johnson		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15342
Name of Employer CNA		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 125.01
		<input type="text"/> 375.03	Contribution

C.	Full Name (Last, First, Middle Initial) Daniel Jordan		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2008
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.15287
Name of Employer CNA Insurance		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 225.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 325.02
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Robert Keith

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15381
Amount of Each Receipt this Period: 187.50
Contribution

B. Full Name (Last, First, Middle Initial)
Susan Kelly

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15343
Amount of Each Receipt this Period: 125.01
Contribution

C. Full Name (Last, First, Middle Initial)
Michael Kennemer

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15288
Amount of Each Receipt this Period: 75.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 387.51

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 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
Thomas Kocaj

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.03

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15344

Amount of Each Receipt this Period

125.01

Contribution

B.

Full Name (Last, First, Middle Initial)
Michael Komoll

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15289

Amount of Each Receipt this Period

75.00

Contribution

C.

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

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 308.35

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15345

Amount of Each Receipt this Period

125.01

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

325.02

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 24 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
John Landenberger

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15346

Amount of Each Receipt this Period 125.01

Contribution

B.

Full Name (Last, First, Middle Initial)
Michael Levins

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15291

Amount of Each Receipt this Period 75.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Heather Libby

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15293

Amount of Each Receipt this Period 75.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 275.01

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 25 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
Peter Lies

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15347

Amount of Each Receipt this Period 125.01

Contribution

B.

Full Name (Last, First, Middle Initial)
Donny Lippard

Mailing Address 333 S. Wabash

City State Zip Code
Chicago IL 60604

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15382

Amount of Each Receipt this Period 187.50

Contribution

C.

Full Name (Last, First, Middle Initial)
Michael Mallon

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15348

Amount of Each Receipt this Period 125.01

Contribution

SUBTOTAL of Receipts This Page (optional) 437.52

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 26 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Joseph Manero	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address CNA Plaza	Transaction ID: SA11AI.15297
	City State Zip Code Chicago IL 60685	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer CNA Insurance	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
B.	Full Name (Last, First, Middle Initial) Robert Mann	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address CNA Plaza	Transaction ID: SA11AI.15383
	City State Zip Code Chicago IL 60685	Amount of Each Receipt this Period 187.50
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer CNA	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	
C.	Full Name (Last, First, Middle Initial) Marilyn McGirr	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address CNA Plaza	Transaction ID: SA11AI.15349
	City State Zip Code Chicago IL 60685	Amount of Each Receipt this Period 125.01
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer CNA	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.03	

SUBTOTAL of Receipts This Page (optional) ▶

387.51

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 27 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Richard McGregor

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60604

FEC ID number of contributing federal political committee. C

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.35

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15350

Amount of Each Receipt this Period 125.01

Contribution

B. Full Name (Last, First, Middle Initial)
Craig Meadors

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

FEC ID number of contributing federal political committee. C

Name of Employer CNA Insurance Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15372

Amount of Each Receipt this Period 150.00

Contribution

C. Full Name (Last, First, Middle Initial)
Karen E. Melchert

Mailing Address 333 S. Wabash
43rd Floor

City Chicago State IL Zip Code 60604

FEC ID number of contributing federal political committee. C

Name of Employer CNA Insurance Occupation Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.35

Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15351

Amount of Each Receipt this Period 125.01

Contribution

SUBTOTAL of Receipts This Page (optional) 400.02

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 28 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Stephen Menke
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 Date of Receipt 09 / 15 / 2008
 Transaction ID: SA11AI.15352
 Amount of Each Receipt this Period 125.01
 Contribution
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 375.03

B. Full Name (Last, First, Middle Initial)
Craig Mense
 Mailing Address CNA Plaza
 City Chicago State IL Zip Code 60685
 Date of Receipt 09 / 15 / 2008
 Transaction ID: SA11AI.15390
 Amount of Each Receipt this Period 250.02
 Contribution
 Name of Employer CNA Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 750.06

C. Full Name (Last, First, Middle Initial)
Brian Mibus
 Mailing Address CNA Plaza
 City Chicago State ID Zip Code 60685
 Date of Receipt 09 / 15 / 2008
 Transaction ID: SA11AI.15298
 Amount of Each Receipt this Period 75.00
 Contribution
 Name of Employer CNA Insurance Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 225.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.03
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 29 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Christine Michals-Bucher

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15299
 Amount of Each Receipt this Period: 75.00
 Contribution

B. Full Name (Last, First, Middle Initial)
William Morgan

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15353
 Amount of Each Receipt this Period: 125.01
 Contribution

C. Full Name (Last, First, Middle Initial)
Timothy Morse

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.68

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15300
 Amount of Each Receipt this Period: 75.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 275.01

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 30 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
William Nachtsheim

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 562.50

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15384

Amount of Each Receipt this Period

187.50

Contribution

B.

Full Name (Last, First, Middle Initial)
Jeffrey Neuenschwander

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Insurance Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.03

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15354

Amount of Each Receipt this Period

125.01

Contribution

C.

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

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15323

Amount of Each Receipt this Period

120.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

432.51

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 31 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
James O'Malley

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Insurance Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15324

Amount of Each Receipt this Period

120.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Lawrence Pagliaro

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15301

Amount of Each Receipt this Period

75.00

Contribution

C.

Full Name (Last, First, Middle Initial)
David Perry

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer Occupation
CNA Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.03

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15355

Amount of Each Receipt this Period

125.01

Contribution

SUBTOTAL of Receipts This Page (optional)

320.01

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 32 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
William Phillips

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15303

Amount of Each Receipt this Period 75.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Fred Piertopola

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15356

Amount of Each Receipt this Period 125.01

Contribution

C.

Full Name (Last, First, Middle Initial)
Thomas Pontarelli

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.06

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15391

Amount of Each Receipt this Period 250.02

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 450.03

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 33 / 51
	<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Richard Pye		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15357
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CNA		Occupation Executive	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 375.03	
		<input type="text"/> 125.01	

B.	Full Name (Last, First, Middle Initial) James Ramsdell		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15304
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CNA		Occupation Executive	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 225.00	
		<input type="text"/> 75.00	

C.	Full Name (Last, First, Middle Initial) Mark J Reilly		Date of Receipt
	Mailing Address CNA Plaza		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Chicago	IL	60685
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.15305
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer CNA Insurance		Occupation Executive	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 225.00	
		<input type="text"/> 75.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 275.01
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 34 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Mark L Reilly

Mailing Address CNA Plaza

City CNA Plaza State IL Zip Code 60604

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15306

Amount of Each Receipt this Period 75.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mary Ribikawskis

Mailing Address CNA Plaza

City Chicago State ID Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15307

Amount of Each Receipt this Period 75.00

Contribution

C. Full Name (Last, First, Middle Initial)
Melville Sampson

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15308

Amount of Each Receipt this Period 75.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 225.00

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 35 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Matthew Sasso

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15309
Amount of Each Receipt this Period: 75.00
Contribution

B. Full Name (Last, First, Middle Initial)
Douglas Schaeffer

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15310
Amount of Each Receipt this Period: 75.00
Contribution

C. Full Name (Last, First, Middle Initial)
Michael Sehr

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: SA11AI.15385
Amount of Each Receipt this Period: 187.50
Contribution

SUBTOTAL of Receipts This Page (optional) ► 337.50

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 36 / 51

(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Andrew Shapiro		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza		Transaction ID: SA11AI.15386		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 187.50	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer CNA	Occupation Executive	Aggregate Year-to-Date 562.50		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) David Smith		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza		Transaction ID: SA11AI.15358		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 125.01	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer CNA	Occupation Executive	Aggregate Year-to-Date 375.03		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Ralph Soletti		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address CNA Plaza		Transaction ID: SA11AI.15361		
	City Chicago	State IL	Zip Code 60685	Amount of Each Receipt this Period 125.01	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer CNA	Occupation Executive	Aggregate Year-to-Date 375.03		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

437.52

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 37 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
Michael Stapleton

Mailing Address 333 S. Wabash

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15387

Amount of Each Receipt this Period
187.50

Contribution

B.

Full Name (Last, First, Middle Initial)
Ronald Stegeman

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15362

Amount of Each Receipt this Period
125.01

Contribution

C.

Full Name (Last, First, Middle Initial)
Karen Stuttman

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.15363

Amount of Each Receipt this Period
125.01

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **437.52**

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 38 / 51
(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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)
John Tatum

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Insurance Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15364

Amount of Each Receipt this Period 125.01

Contribution

B.

Full Name (Last, First, Middle Initial)
Teri Tegtman

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15313

Amount of Each Receipt this Period 75.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Jennifer Throm

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15314

Amount of Each Receipt this Period 75.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 275.01

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 39 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
John Tjards

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15315

Amount of Each Receipt this Period 75.00

Contribution

B. Full Name (Last, First, Middle Initial)
Cynthia Traczyk

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15365

Amount of Each Receipt this Period 125.01

Contribution

C. Full Name (Last, First, Middle Initial)
Marie Usher

Mailing Address CNA Plaza

City Chicago State IL Zip Code 60685

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

Name of Employer CNA Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2008

Transaction ID: SA11AI.15366

Amount of Each Receipt this Period 125.01

Contribution

SUBTOTAL of Receipts This Page (optional) ► 325.02

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 40 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Jeffrey Vankley

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.15367

Amount of Each Receipt this Period 125.01

Contribution

B. Full Name (Last, First, Middle Initial)
Richmond Waller

Mailing Address 333 S. Wabash

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.15368

Amount of Each Receipt this Period 125.01

Contribution

C. Full Name (Last, First, Middle Initial)
Gregory Weiland

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60604

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

Name of Employer CNA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.15317

Amount of Each Receipt this Period 75.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 325.02

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 41 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial)
Stephen J. Westman
Mailing Address CNA Plaza
City Chicago State IL Zip Code 60685
FEC ID number of contributing federal political committee. **C**
Name of Employer CNA Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 562.50
Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15388
Amount of Each Receipt this Period 187.50
Contribution

B. Full Name (Last, First, Middle Initial)
Joe Wolfe
Mailing Address CNA Plaza
City Chicago State IL Zip Code 60685
FEC ID number of contributing federal political committee. **C**
Name of Employer CNA Insurance Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15318
Amount of Each Receipt this Period 75.00
Contribution

C. Full Name (Last, First, Middle Initial)
Robert Wolfe
Mailing Address CNA Plaza
City Chicago State IL Zip Code 60685
FEC ID number of contributing federal political committee. **C**
Name of Employer CNA Insurance Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.15319
Amount of Each Receipt this Period 75.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 337.50
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 42 / 51
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) John Wurzler		Date of Receipt
	Mailing Address CNA Plaza		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chicago	IL	60604
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CNA		Occupation Executive	Transaction ID: SA11AI.15370
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="378.00"/>	
			Amount of Each Receipt this Period <input type="text" value="126.00"/>
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="126.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="12893.82"/>

**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)

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<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	Transaction ID: SB23.15421 Date of Disbursement MM / DD / YYYY 08 / 28 / 2008
	Mailing Address PO Box City Batavia State IL Zip Code 60510 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 15000.00	
B. Full Name (Last, First, Middle Initial) The West Virginia Chamber PAC	Transaction ID: SB23.15424 Date of Disbursement MM / DD / YYYY 08 / 28 / 2008
	Mailing Address PO Box 2789 City Charleston State WV Zip Code 25330-2789 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 1000.00	

SUBTOTAL of Disbursements This Page (optional)	▶	16000.00
TOTAL This Period (last page this line number only)	▶	19000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 51

<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

<p>A. Full Name (Last, First, Middle Initial) Chris Harris Campaign</p> <p>Mailing Address 1309A W. Abram</p> <p>City Arlington State TX Zip Code 76013</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.15396 Date of Disbursement 07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Scott</p> <p>Mailing Address 162 Hurt Street, NE</p> <p>City Atlanta State GA Zip Code 30303</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.15420 Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Dan Branch Campaign</p> <p>Mailing Address 2100 McKinney Avenue Suite 1501A</p> <p>City Dallas State TX Zip Code 75201</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.15402 Date of Disbursement 07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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)

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<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Dawna Dukes Campaign	Transaction ID: SB29.15403 Date of Disbursement 07 / 22 / 2008
	Mailing Address PO Box 14645	Amount of Each Disbursement this Period 250.00
	City Austin State TX Zip Code 78761	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eddie Lucio Campaign	Transaction ID: SB29.15397 Date of Disbursement 07 / 22 / 2008
	Mailing Address PO Box 5958	Amount of Each Disbursement this Period 500.00
	City Brownsville State TX Zip Code	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gary Elkins Campaign	Transaction ID: SB29.15411 Date of Disbursement 07 / 22 / 2008
	Mailing Address 16430 Koester	Amount of Each Disbursement this Period 500.00
	City Houston State TX Zip Code 77040	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1250.00
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 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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Helen Giddings Campaign	Transaction ID: SB29.15406 Date of Disbursement
	Mailing Address 400 South Zang #816	<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75208	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jerry Madden Campagin	Transaction ID: SB29.15405 Date of Disbursement
	Mailing Address 520 E Central Parkway Suite 106	<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Plano State TX Zip Code 75074	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joe Driver Campaign	Transaction ID: SB29.15409 Date of Disbursement
	Mailing Address 201 South Glenbrook	<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Garland State TX Zip Code 75040	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1250.00"/>
TOTAL 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)

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<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Kelly Hancock Campagin Mailing Address 8944 Glenara City North Richland Hil State TX Zip Code 76180 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15400 Date of Disbursement 07 / 22 / 2008 Amount of Each Disbursement this Period 500.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Kim Brimer Campaign Mailing Address 1600 W. 7th St. Suite 650 City Fort Worth State TX Zip Code 76102 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15410 Date of Disbursement 07 / 22 / 2008 Amount of Each Disbursement this Period 1000.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Leticia Van De Putte Campaign Mailing Address 1616 Mulberry City San Antonio State TX Zip Code 78201 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15398 Date of Disbursement 07 / 22 / 2008 Amount of Each Disbursement this Period 500.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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 49 / 51

<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.	Full Name (Last, First, Middle Initial) Mando Martinez Campaign Mailing Address 1107 W. 4th Street City Weslaco State TX Zip Code 78596 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15401 Date of Disbursement 07 / 22 / 2008 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 211 South Fifth Street City Columbus State OH Zip Code 43202 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15413 Date of Disbursement 07 / 31 / 2008 Amount of Each Disbursement this Period 5500.00
C.	Full Name (Last, First, Middle Initial) Ryan Guileen Campagin Mailing Address PO Box 430172 City Laredo State TX Zip Code 78043 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15404 Date of Disbursement 07 / 22 / 2008 Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
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 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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

<p>A. Full Name (Last, First, Middle Initial) Stratton for Supreme Court</p> <p>Mailing Address 832 South Fifth Street</p> <p>City Columbus State OH Zip Code 43206</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.15414 Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 5500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Tom Craddick Campaign</p> <p>Mailing Address 3108 Stanolind</p> <p>City Midland State TX Zip Code 79705</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.15399 Date of Disbursement 07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Tony Goolsby Campaign</p> <p>Mailing Address 9 Cheltenham Way</p> <p>City Dallas State TX Zip Code</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.15408 Date of Disbursement 07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A. Full Name (Last, First, Middle Initial) Troy Fraser Campaign Mailing Address PO Box 13243 City Austin State TX Zip Code 78711 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15395 Date of Disbursement 07 / 22 / 2008
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) Warren Chisum Campaign Mailing Address PO Box 2061 City Pampa State TX Zip Code 79066 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.15407 Date of Disbursement 07 / 22 / 2008
	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

21500.00