

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 CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

ADDRESS (number and street) 1 Massachusetts Avenue, NW Suite 310 WASHINGTON DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00163048 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 04 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer David Bradley Signature of Treasurer Electronically Filed by David Bradley Date 07 17 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		28552.99
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	26061.43									
(c) Total Receipts (from Line 19)	53773.95	125491.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	79835.38	154044.73								
7. Total Disbursements (from Line 31)	42100.00	116309.35								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37735.38	37735.38								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7265.97	15306.44
(ii) Unitemized	46507.98	110185.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	53773.95	125491.74
(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)	53773.95	125491.74
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))	53773.95	125491.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	53773.95	125491.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	209.35
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	209.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42100.00	116100.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	42100.00	116309.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42100.00	116100.00

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	53773.95	125491.74
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53773.95	125491.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 24
	<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

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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Rose Adams	Date of Receipt
	Mailing Address 1 Sonata Trail	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 09 / 2009
	City State Zip Code Little Rock AR 72205	Transaction ID: SA11AI.9703
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 85.00
Name of Employer Arkansas Community Action Agencies Ass	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 394.00	

B.	Full Name (Last, First, Middle Initial) Rose Adams	Date of Receipt
	Mailing Address 1 Sonata Trail	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 30 / 2009
	City State Zip Code Little Rock AR 72205	Transaction ID: SA11AI.9650
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 95.00
Name of Employer Arkansas Community Action Agencies Ass	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 489.00	

C.	Full Name (Last, First, Middle Initial) Rose Adams	Date of Receipt
	Mailing Address 1 Sonata Trail	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 05 / 2009
	City State Zip Code Little Rock AR 72205	Transaction ID: SA11AI.9740
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 10.00
Name of Employer Arkansas Community Action Agencies Ass	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 499.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 190.00
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: (check only one)	PAGE 7 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Rose Adams		Date of Receipt	
	Mailing Address 1 Sonata Trail		M M / D D / Y Y Y Y Y 06 / 05 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9748
	Little Rock	AR	72205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer Arkansas Community Action Agencies Ass		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 509.00		

B.	Full Name (Last, First, Middle Initial) Rose Adams		Date of Receipt	
	Mailing Address 1 Sonata Trail		M M / D D / Y Y Y Y Y 06 / 05 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9758
	Little Rock	AR	72205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer Arkansas Community Action Agencies Ass		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 534.00		

C.	Full Name (Last, First, Middle Initial) Rose Adams		Date of Receipt	
	Mailing Address 1 Sonata Trail		M M / D D / Y Y Y Y Y 06 / 05 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9801
	Little Rock	AR	72205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		196.00	
Name of Employer Arkansas Community Action Agencies Ass		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 730.00		

SUBTOTAL of Receipts This Page (optional)	▶	231.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Thomas Bowmar		Date of Receipt	
	Mailing Address 136 Old Park Avenue		M M / D D / Y Y Y Y Y 06 / 22 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9829
	Lexington	KY	40502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		220.00	
Name of Employer KY Assn. for Community Action		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		220.00		

B.	Full Name (Last, First, Middle Initial) Lamar Braxton		Date of Receipt	
	Mailing Address P.O. Box 568		M M / D D / Y Y Y Y Y 06 / 29 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9914
	Natchez	MS	39121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		634.70	
Name of Employer AJFC-CAA		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		634.70		

C.	Full Name (Last, First, Middle Initial) Jack Burch		Date of Receipt	
	Mailing Address 2060 Russell Cave Road		M M / D D / Y Y Y Y Y 06 / 05 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9778
	Lexington	KY	40511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Lexington CAC		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		399.00		

SUBTOTAL of Receipts This Page (optional)	▶	954.70
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 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Brenda Callahan-Johnson		Date of Receipt
	Mailing Address 3270 Spyglass Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 17 / 2009
	City	State	Zip Code
	Atwater	CA	95301
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9639
Name of Employer Merced County CAA		Occupation Executive Director	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 ▼ 250.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Dr. Donald Carpenter		Date of Receipt
	Mailing Address 1854 Navajo Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 29 / 2009
	City	State	Zip Code
	Ogden	UT	84403
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9709
Name of Employer Ogden-Weber Community Action P		Occupation Executive Director	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 ▼ 300.00	<input type="text"/> 300.00

C.	Full Name (Last, First, Middle Initial) Kenn Cockrell		Date of Receipt
	Mailing Address 4646 Village Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 29 / 2009
	City	State	Zip Code
	Jackson	MS	39206
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9899
Name of Employer Hinds County HRA		Occupation Executive Director	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 ▼ 250.00	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 600.00
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: (check only one)	PAGE 10 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Phil Cole		Date of Receipt MM / DD / YYYY 06 / 22 / 2009		
	Mailing Address 4006 Windermere Road		Transaction ID: SA11AI.9880		
	City Upper Arlington	State OH	Zip Code 43220	Amount of Each Receipt this Period 199.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Ohio Assn. of Community Action	Occupation Executive Director	Aggregate Year-to-Date 398.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Pamela Craig		Date of Receipt MM / DD / YYYY 06 / 22 / 2009		
	Mailing Address 149 Whippoorwill Road		Transaction ID: SA11AI.9875		
	City Milton	State KY	Zip Code 40045	Amount of Each Receipt this Period 385.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer KY Association for Community A	Occupation Executive Staff	Aggregate Year-to-Date 385.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Fran Forman		Date of Receipt MM / DD / YYYY 04 / 17 / 2009		
	Mailing Address 610 Sunrise Drive Unit 6A		Transaction ID: SA11AI.9640		
	City Santa Maria	State CA	Zip Code 93455-2199	Amount of Each Receipt this Period 70.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CAA of Santa Barbara County	Occupation Executive Director	Aggregate Year-to-Date 289.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	654.00
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 11 / 24						
	(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

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NAME OF COMMITTEE (In Full)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Carrie Fortune		Date of Receipt	
	Mailing Address 415 N. Third Street		M M / D D / Y Y Y Y Y 06 / 05 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9784
	Augusta	AR	72006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		223.00	
Name of Employer AR Community Action Agency		Occupation Executive Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 223.00		

B.	Full Name (Last, First, Middle Initial) William Franklin		Date of Receipt	
	Mailing Address 2035 Van Norman Curve		M M / D D / Y Y Y Y Y 06 / 29 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9887
	McComb	MS	39648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Southwest Mississippi Opportun		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Karen Frederick		Date of Receipt	
	Mailing Address 105 Old Marsh Hill Road		M M / D D / Y Y Y Y Y 05 / 13 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.9675
	Dracut	MA	01826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Community Teamwork		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.00		

SUBTOTAL of Receipts This Page (optional)	773.00
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 12 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Estella Fritzinger		Date of Receipt MM / DD / YYYY 05 / 13 / 2009		
	Mailing Address 178 Plum Hollow Road		Transaction ID: SA11AI.9674		
	City East Falmouth	State MA	Zip Code 02536	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CAC of Cape Cod	Occupation Executive Staff			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.00			

B.	Full Name (Last, First, Middle Initial) Jean Harper		Date of Receipt MM / DD / YYYY 06 / 05 / 2009		
	Mailing Address 5431 Country Club Road		Transaction ID: SA11AI.9737		
	City Malvern	State AR	Zip Code 72104-6381	Amount of Each Receipt this Period 5.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AR Community Action Assn.	Occupation Deputy Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.00			

C.	Full Name (Last, First, Middle Initial) Susan Kooperstein		Date of Receipt MM / DD / YYYY 05 / 13 / 2009		
	Mailing Address 181 Lamartine Street, #2		Transaction ID: SA11AI.9671		
	City Jamaica Plain	State MA	Zip Code 02130	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Action for Boston Community De	Occupation Director of Public Information			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.00			

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 13 / 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Ronald Logsdon		Date of Receipt MM / DD / YYYY 06 / 22 / 2009		
	Mailing Address P.O. Box 23023		Transaction ID: SA11AI.9851		
	City Owensboro	State KY	Zip Code 42304	Amount of Each Receipt this Period 214.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer KCEOC	Occupation Deputy Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 413.00			

B.	Full Name (Last, First, Middle Initial) Don Mathis		Date of Receipt MM / DD / YYYY 04 / 17 / 2009		
	Mailing Address 305 Tidewater Drive		Transaction ID: SA11AI.9641		
	City Havre de Grace	State MD	Zip Code 21078	Amount of Each Receipt this Period 50.43	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Community Action Partners-hip	Occupation President/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 307.23			

C.	Full Name (Last, First, Middle Initial) Candace Mattison		Date of Receipt MM / DD / YYYY 06 / 22 / 2009		
	Mailing Address 4412 Turtle Creek Way		Transaction ID: SA11AI.9839		
	City Lexington	State KY	Zip Code 40509	Amount of Each Receipt this Period 290.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Community Action Council	Occupation Executive Staff			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00			

SUBTOTAL of Receipts This Page (optional)	▶	554.43
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 / 24
(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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial)
Billy McCain

Mailing Address 1101 South Street

City Cleveland State MS Zip Code 38732

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

Name of Employer MS Community Action Assn Occupation Executive Staff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 29 / 2009

Transaction ID: SA11AI.9900

Amount of Each Receipt this Period 225.00

B.

Full Name (Last, First, Middle Initial)
Kathleen McDermott

Mailing Address 60 Olde Colonial Drive

City Gardener State MA Zip Code 01440

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

Name of Employer Montachusett Oppty Council Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.00

Date of Receipt 05 / 13 / 2009

Transaction ID: SA11AI.9669

Amount of Each Receipt this Period 50.00

C.

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

Mailing Address 1924 Ephesus Church Road

City Harned State KY Zip Code 40144-5573

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

Name of Employer Lincoln Resource Conserva-tion Occupation Board Member

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt 06 / 22 / 2009

Transaction ID: SA11AI.9844

Amount of Each Receipt this Period 272.00

SUBTOTAL of Receipts This Page (optional) ▶ 547.00

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 15 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Diann Payne		Date of Receipt MM / DD / YYYY 06 / 29 / 2009		
	Mailing Address 1621 Pine Tassel Drive		Transaction ID: SA11AI.9898		
	City Gautier	State MS	Zip Code 39553	Amount of Each Receipt this Period 663.84	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Jackson County CAC	Occupation Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 663.84			

B.	Full Name (Last, First, Middle Initial) Ricky Pondexter		Date of Receipt MM / DD / YYYY 06 / 05 / 2009		
	Mailing Address 4302 Sanderson Lane		Transaction ID: SA11AI.9799		
	City Texarkana	State AZ	Zip Code 71854	Amount of Each Receipt this Period 185.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SW Arkansas Development Council	Occupation Executive Staff			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 263.00			

C.	Full Name (Last, First, Middle Initial) Bill Powell		Date of Receipt MM / DD / YYYY 05 / 29 / 2009		
	Mailing Address 1431 Cactus Drive		Transaction ID: SA11AI.9718		
	City Levelland	State TX	Zip Code 79336	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer South Plains CAA	Occupation Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 399.00			

SUBTOTAL of Receipts This Page (optional)	▶	1048.84
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 16 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Loyd Price		Date of Receipt
	Mailing Address 1802 Metzler Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 05 / 2009
	City	State	Zip Code
	Jonesboro	AR	72401
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9797
Name of Employer Crowley's Ridge Development Co		Occupation Executive Staff	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"/> 70.00
		<input type="text"/> 269.00	

B.	Full Name (Last, First, Middle Initial) Loyd Price		Date of Receipt
	Mailing Address 1802 Metzler Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 05 / 2009
	City	State	Zip Code
	Jonesboro	AR	72401
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9800
Name of Employer Crowley's Ridge Development Co		Occupation Executive Staff	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"/> 73.00
		<input type="text"/> 342.00	

C.	Full Name (Last, First, Middle Initial) Diane Smith		Date of Receipt
	Mailing Address 303 Hospital Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 29 / 2009
	City	State	Zip Code
	Cleveland	MS	38732
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9928
Name of Employer Self Employed		Occupation Dentist	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"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 643.00
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: (check only one)	PAGE 17 / 24
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Gerald Smith		Date of Receipt
	Mailing Address 5601 Colusa Drive		<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 05 / 29 / 2009
	City	State	Zip Code
	Fort Worth	TX	76133
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9720
Name of Employer Texas Assn. of Community Actio		Occupation Executive Staff	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"/> 470.00

B.	Full Name (Last, First, Middle Initial) Vicki Smith		Date of Receipt
	Mailing Address 704 Taos Drive		<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 05 / 29 / 2009
	City	State	Zip Code
	Victoria	TX	77904
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9715
Name of Employer CAC of Victoria		Occupation Executive Director	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"/> 100.00

C.	Full Name (Last, First, Middle Initial) Elizabeth Steinberg		Date of Receipt
	Mailing Address 1585 Cordova Drive		<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 04 / 17 / 2009
	City	State	Zip Code
	San Luis Obispo	CA	93405
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9633
Name of Employer EOC of San Luis Obispo Co- unty		Occupation Executive Director	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"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 670.00
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 18 / 24
	(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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Beth Ann Strollo		Date of Receipt	
	Mailing Address 103 Glen Avenue		M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.9664
	Newton Center	MA	02459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Quincy Community Action Organi		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.00		

B.	Full Name (Last, First, Middle Initial) Annie Thompson		Date of Receipt	
	Mailing Address 1266n Highway 421 P.O. Box 1081		M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.9845
	Manchester	KY	40962	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		245.00	
Name of Employer Community Action Council		Occupation Executive Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00		

SUBTOTAL of Receipts This Page (optional)	295.00
TOTAL This Period (last page this line number only)	7265.97

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) BAIRD FOR CONGRESS <hr/> Mailing Address PO Box 5016 <hr/> City Vancouver State WA Zip Code 98668 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District: 03	Transaction ID: SB23.9932 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="font-size: 24px;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	7		2	0	0	9														
1000.00																							
B.	Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE <hr/> Mailing Address P.O. Box 1776 <hr/> City Freedom State PA Zip Code 15042 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/ Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 04	Transaction ID: SB23.9941 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="font-size: 24px;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	5		2	0	0	9														
1000.00																							
C.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID <hr/> Mailing Address PO BOX 85223 <hr/> City LAS VEGAS State NV Zip Code 89185 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 00	Transaction ID: SB23.9937 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="font-size: 24px;">5000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	9	5000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	9														
5000.00																							

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 85223 City LAS VEGAS State NV Zip Code 89185 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9938 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) FRIENDS OF BYRON DORGAN Mailing Address PO BOX 871 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9946 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) GRASSLEY, CHARLES E SENATOR Mailing Address PO BOX 1000 City DES MOINES State IA Zip Code 50304 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9936 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	8500.00
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 22 / 24

<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) MCCOLLUM, BETTY	Transaction ID: SB23.9945 Date of Disbursement 06 / 17 / 2009
	Mailing Address PO BOX 14131	Amount of Each Disbursement this Period 2500.00
	City ST PAUL State MN Zip Code 55114	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN	Transaction ID: SB23.9930 Date of Disbursement 04 / 09 / 2009
	Mailing Address PO BOX 3662	Amount of Each Disbursement this Period 2600.00
	City SEATTLE State WA Zip Code 98124	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PROGRESSIVE VOTERS OF AMERICA	Transaction ID: SB23.9949 Date of Disbursement 06 / 30 / 2009
	Mailing Address PO Box 852	Amount of Each Disbursement this Period 2500.00
	City Burlington State VT Zip Code 05402	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7600.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: SB23.9947 Date of Disbursement	
	Mailing Address PO BOX 100	<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>	
	City BATTLE CREEK State MI Zip Code 49016	Amount of Each Disbursement this Period	<input type="text" value="2500.00"/>
	Purpose of Disbursement	<input type="text"/>	
	Candidate Name	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MI District: 07		
B.	Full Name (Last, First, Middle Initial) TIERNEY, JOHN	Transaction ID: SB23.9944 Date of Disbursement	
	Mailing Address 21 Settler's Way	<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>	
	City SALEM State MA Zip Code 01970	Amount of Each Disbursement this Period	<input type="text" value="2000.00"/>
	Purpose of Disbursement	<input type="text"/>	
	Candidate Name	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MA District: 06		
C.	Full Name (Last, First, Middle Initial) VAN HOLLEN, CHRIS	Transaction ID: SB23.9931 Date of Disbursement	
	Mailing Address 3514 FARRAGUT AVE	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>	
	City KENINGSTON State MD Zip Code 20895	Amount of Each Disbursement this Period	<input type="text" value="2500.00"/>
	Purpose of Disbursement	<input type="text"/>	
	Candidate Name	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MD District: 08		

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 24

<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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

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

Mailing Address P.O. Box 10003

City State Zip Code
Merrillville IN 46411

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IN District: 01

Transaction ID: SB23.9939

Date of Disbursement

06 / 01 / 2009

Amount of Each Disbursement this Period

5000.00

B.

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

Mailing Address P.O. Box 10003

City State Zip Code
Merrillville IN 46411

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IN District: 01

Transaction ID: SB23.9940

Date of Disbursement

06 / 01 / 2009

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

42100.00