

# 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  
AC PAC ACA International Political Action Committee

ADDRESS (number and street) 4040 W. 70th St  
Check if different than previously reported. (ACC) Minneapolis MN 55435

2. **FEC IDENTIFICATION NUMBER** C00034785  
**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 10 01 2007 through 10 31 2007

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 Rozanne M. Andersen

Signature of Treasurer Electronically Filed by Rozanne M. Andersen Date 11 05 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ACPAC ACA International Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		132050.73
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	255258.18									
(c) Total Receipts (from Line 19) .....	16383.16	211453.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	271641.34	343504.02								
7. Total Disbursements (from Line 31) .....	15055.17	86917.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	256586.17	256586.17								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
ACPAC ACA International Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	15468.00	190011.00
(i) Itemized (use Schedule A) .....	320.00	16464.12
(ii) Unitemized .....	15788.00	206475.12
(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) .....	15788.00	206475.12
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.) .....	595.16	4978.17
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)) .....	16383.16	211453.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16383.16	211453.29

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	55.17	6417.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	55.17	6417.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	80000.00
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	500.00
(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	500.00
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))..	15055.17	86917.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	15055.17	86917.85

**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) .....	15788.00	206475.12
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15788.00	205975.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	55.17	6417.85
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	55.17	6417.85

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 22
	<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)  
AC PAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Chris D. Becraft

Mailing Address PO Box 310

City State Zip Code  
Scottsdale AZ 85252-0310

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

Name of Employer  
Collection Service Bureau, Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

**Transaction ID: R5383**

Amount of Each Receipt this Period  
100.00

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
Ms. Nancy J. Borgen

Mailing Address PO Box 2288

City State Zip Code  
La Crosse WI 54602-2288

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

Name of Employer  
Credit Bureau Data, Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1160.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

**Transaction ID: R5373**

Amount of Each Receipt this Period  
250.00

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
Beverly J. Bunton

Mailing Address PO Box 182221

City State Zip Code  
Chattanooga TN 37422-7221

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

Name of Employer  
North American Credit Services, Inc.

Occupation  
Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

**Transaction ID: R5370**

Amount of Each Receipt this Period  
500.00

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<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)  
AC PAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dallas S. Bunton, Sr.

Mailing Address PO Box 182221

City State Zip Code  
Chattanooga TN 37422-7221

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

Name of Employer  
North American Credit Services, Inc.

Occupation  
CEO-Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: R5377

Amount of Each Receipt this Period  
1250.00

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
Darin L. Bunton

Mailing Address PO Box 182221

City State Zip Code  
Chattanooga TN 37422-7221

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

Name of Employer  
North American Credit Services, Inc.

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Transaction ID: R5360

Amount of Each Receipt this Period  
500.00

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
Ms. Michelle Camp

Mailing Address 3782 W 2340 S. #B

City State Zip Code  
West Valley City UT 84120-7295

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

Name of Employer  
Express Recovery Services, Inc.

Occupation  
Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: R5364

Amount of Each Receipt this Period  
100.00

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<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)  
**ACPAC ACA International Political Action Committee**

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Debra J. Ciskey Mailing Address PO Box 3097 City State Zip Code Bloomington IL 61702-3097 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7 <b>Transaction ID: R5362</b> Amount of Each Receipt this Period 200.00 Credit Card
Name of Employer Occupation Afni, Inc. Director, Performance Development Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Joseph M. Costello, Jr. Mailing Address 50 Church St Fl 5 City State Zip Code Cambridge MA 02138-3726 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7 <b>Transaction ID: R5379</b> Amount of Each Receipt this Period 250.00 Credit Card
Name of Employer Occupation Astra Business Services, Inc. Executive Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Moises Eilemberg Mailing Address PO Box 672 City State Zip Code Moline IL 61266-0672 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7 <b>Transaction ID: R5353</b> Amount of Each Receipt this Period 150.00 Credit Card
Name of Employer Occupation H & R Accounts, Inc. President and CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 22
	<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)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. John Erickson, Jr.  
 Mailing Address **PO Box 64444**  
 City **Saint Paul** State **MN** Zip Code **55164-0444**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **I.C. System, Inc.** Occupation **Business Group Manager**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **3750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 04 / 2007**  
**Transaction ID: R5365**  
 Amount of Each Receipt this Period  
**1250.00**  
 Credit Card

**B.** Full Name (Last, First, Middle Initial)  
 Michael Fromknecht  
 Mailing Address **223 W Jackson Blvd Ste 900**  
 City **Chicago** State **IL** Zip Code **60606-6912**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Merchants Credit Guide Company** Occupation **President**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **3750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 03 / 2007**  
**Transaction ID: R5361**  
 Amount of Each Receipt this Period  
**1250.00**  
 Credit Card

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Thomas Haag  
 Mailing Address **PO Box 6250**  
 City **Madison** State **WI** Zip Code **53716-0250**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **State Collection Service, Inc.** Occupation **President**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 04 / 2007**  
**Transaction ID: R5367**  
 Amount of Each Receipt this Period  
**250.00**  
 Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 22
	<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)  
AC PAC ACA International Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Hall Mailing Address PO Box 1686 City State Zip Code Greeley CO 80632-1686 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7 <b>Transaction ID: R5354</b> Amount of Each Receipt this Period 100.00 Credit Card
Name of Employer Professional Finance Company, Inc. Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Tina Hanson Mailing Address PO Box 6250 City State Zip Code Madison WI 53716-0250 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7 <b>Transaction ID: R5363</b> Amount of Each Receipt this Period 200.00 Credit Card
Name of Employer State Collection Service, Inc. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Steven J. Hunter Mailing Address PO Box 9004 City State Zip Code Renton WA 98057-9004 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7 <b>Transaction ID: R5368</b> Amount of Each Receipt this Period 250.00 Credit Card
Name of Employer ER Solutions, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 22
	<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)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Ms. Pauline R. Kussart

Mailing Address **PO Box 45710**

City **Madison** State **WI** Zip Code **53744-5710**

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

Name of Employer **H. E. Stark Agency, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 04 / 2007**

**Transaction ID: R5369**

Amount of Each Receipt this Period  
**325.00**

Check

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Richard W. LaBonte

Mailing Address **310 Armour Rd Ste 220**

City **North Kansas City** State **MO** Zip Code **64116-3541**

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

Name of Employer **Executive Financial Consultants, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 03 / 2007**

**Transaction ID: R5358**

Amount of Each Receipt this Period  
**100.00**

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
 Loraine E. Lyons

Mailing Address **11811 North Fwy Ste 900**

City **Houston** State **TX** Zip Code **77060-3292**

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

Name of Employer **FMA Alliance Ltd.** Occupation **Vice President/General Counsel**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 04 / 2007**

**Transaction ID: R5374**

Amount of Each Receipt this Period  
**150.00**

Credit Card

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 22
	<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)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Timothy J. Mabry

Mailing Address PO Box 127

City State Zip Code  
**Hermiston OR 97838-0127**

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

Name of Employer Credits Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**1 0 / 0 3 / 2 0 0 7**

**Transaction ID: R5357**

Amount of Each Receipt this Period  
**250.00**

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Mark Neeb

Mailing Address PO Box 1088

City State Zip Code  
**Rochester MN 55903-1088**

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

Name of Employer The Affiliated Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**1 0 / 0 4 / 2 0 0 7**

**Transaction ID: R5378**

Amount of Each Receipt this Period  
**350.00**

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
 Ms. Mary Orebaugh-McDaniel

Mailing Address 4057 Port Chicago Hwy Ste 300

City State Zip Code  
**Concord CA 94520-1160**

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

Name of Employer CompuMail Occupation Client Relations Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**1 0 / 0 3 / 2 0 0 7**

**Transaction ID: R5349**

Amount of Each Receipt this Period  
**100.00**

Credit Card

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 22
	<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)  
**ACPAC ACA International Political Action Committee**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert J. Perez		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 9752 Villa Woods Dr		<b>Transaction ID:</b> R5375
City State Zip Code Villa Park CA 92861-3157	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Credit Card
Name of Employer Impact Professional Services, LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Michael J. Philippe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 1911 W 57th St		<b>Transaction ID:</b> R5359
City State Zip Code Sioux Falls SD 57108-2710	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Credit Card
Name of Employer Card Acquisition, LLC	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Adam L. Plotkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 621 17th St Ste 2400		<b>Transaction ID:</b> R5356
City State Zip Code Denver CO 80293-2400	Amount of Each Receipt this Period 625.00	
FEC ID number of contributing federal political committee. <b>C</b>		Credit Card
Name of Employer Adam L. Plotkin, P.C.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1875.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 22
	<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)  
AC PAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frank Roa

Mailing Address 169 Myers Corners Rd Ste 110

City State Zip Code  
Wappingers Falls NY 12590-3868

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

Name of Employer Immediate Credit Recovery, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

**Transaction ID:** R5350

Amount of Each Receipt this Period  
400.00

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
Ms. Karolyn Rubin

Mailing Address 29 E Madison St Ste 1650

City State Zip Code  
Chicago IL 60602-4427

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

Name of Employer Bonded Collection Corporation Occupation Senior Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1895.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2007

**Transaction ID:** R5381

Amount of Each Receipt this Period  
400.00

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
Mr. John E. Ruzic, Jr.

Mailing Address PO Box 1671

City State Zip Code  
Marysville CA 95901-1671

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

Name of Employer Rash, Curtis & Associates Occupation CEO and Chairman of the Board

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2007

**Transaction ID:** R5372

Amount of Each Receipt this Period  
350.00

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 22
	<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)  
AC PAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary E. Shores

Mailing Address PO Box 3292

City State Zip Code  
Champaign IL 61826-3292

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

Name of Employer Occupation  
Midstate Collection Solutions, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: R5382

Amount of Each Receipt this Period  
100.00

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stephen Stewart

Mailing Address PO Box 672

City State Zip Code  
Moline IL 61266-0672

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

Name of Employer Occupation  
H & R Accounts, Inc. Chief Operating Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1541.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: R5376

Amount of Each Receipt this Period  
333.00

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas Stockton

Mailing Address 4200 International Pkwy

City State Zip Code  
Carrollton TX 75007-1912

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

Name of Employer Occupation  
CMI Group Chief Executive Officer

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: R5371

Amount of Each Receipt this Period  
1250.00

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1683.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Harry A. Strausser, III

Mailing Address **PO Box 7**

City **Bloomsburg** State **PA** Zip Code **17815-0007**

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

Name of Employer **The Remit Corporation** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 04 / 2007**

**Transaction ID: R5366**

Amount of Each Receipt this Period  
**125.00**

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Harry A. Strausser, Jr.

Mailing Address **PO Box 276**

City **Elysburg** State **PA** Zip Code **17824-0276**

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

Name of Employer **Action Management, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 02 / 2007**

**Transaction ID: R5345**

Amount of Each Receipt this Period  
**100.00**

Cash

**C.** Full Name (Last, First, Middle Initial)  
 Brian Watkins

Mailing Address **PO Box 4070**

City **Medford** State **OR** Zip Code **97501-0148**

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

Name of Employer **Southern Oregon Credit Service, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 03 / 2007**

**Transaction ID: R5352**

Amount of Each Receipt this Period  
**100.00**

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AC PAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Roger D. Weiss		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 12855 Tesson Ferry Rd Ste 200		Transaction ID: R5351
City State Zip Code Saint Louis MO 63128-2912	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>	Credit Card	
Name of Employer CACi Occupation Chief Operating Officer	Aggregate Year-to-Date ▼ 1050.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Christopher G. Wunder		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7
Mailing Address PO Box 549		Transaction ID: R5380
City State Zip Code Timonium MD 21094-0549	Amount of Each Receipt this Period 2660.00	
FEC ID number of contributing federal political committee. <b>C</b>	Check	
Name of Employer Receivables Outsourcing, Inc. Occupation President	Aggregate Year-to-Date ▼ 2660.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Terrance A. Wunsch		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address PO Box 940728		Transaction ID: R5355
City State Zip Code Houston TX 77094-7728	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>	Credit Card	
Name of Employer Collections Unlimited of Texas Inc. Occupation President	Aggregate Year-to-Date ▼ 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>3310.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>15468.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 22	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 ACPAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
 US Bank

Mailing Address 7001 France Ave. S.

City Edina State MN Zip Code 55435

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 4896.17

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 3 1 / 2 0 0 7

Transaction ID: R5392

Amount of Each Receipt this Period  
 595.16

Bank Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	595.16
<b>TOTAL</b> This Period (last page this line number only) .....	▶	595.16

**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 19 / 22

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

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NAME OF COMMITTEE (In Full)

ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** US BANK

Mailing Address 7001 France Ave. S.

City Edina State MN Zip Code 55435

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D915

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

55.17

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

55.17

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

55.17

**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)  
ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Bachmann for Congress</b>		<b>Transaction ID: D909</b> Date of Disbursement 10 / 17 / 2007	
Mailing Address    Box 25950		Amount of Each Disbursement this Period 2500.00	
City Woodbury	State MN		Zip Code 55125
Purpose of Disbursement Contr.			Category/ Type
Candidate Name Michele M. Bachmann			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MN    District: 06			

Full Name (Last, First, Middle Initial) <b>B. Friends of Jim Marshall</b>		<b>Transaction ID: D912</b> Date of Disbursement 10 / 17 / 2007	
Mailing Address    586 Orange Street		Amount of Each Disbursement this Period 2500.00	
City Macon	State GA		Zip Code 31201
Purpose of Disbursement Contr.			Category/ Type
Candidate Name Jim Marshall			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: GA    District: 03			

Full Name (Last, First, Middle Initial) <b>C. Klein for Congress</b>		<b>Transaction ID: D908</b> Date of Disbursement 10 / 17 / 2007	
Mailing Address    21301 Powerline Road, Suite 204		Amount of Each Disbursement this Period 5000.00	
City Boca Raton	State FL		Zip Code 33433
Purpose of Disbursement Contr.			Category/ Type
Candidate Name Ron Klein			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: FL    District: 22			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> 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)  
ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. MUSGRAVE FOR CONGRESS</b>		<b>Transaction ID: D913</b> Date of Disbursement 10 / 17 / 2007
Mailing Address 257 Johnstown Center Drive, #211		Amount of Each Disbursement this Period 1000.00
City Johnstown State CO Zip Code 80534	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Marilyn N. Musgrave		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. McCrery for Congress Committee</b>		<b>Transaction ID: D906</b> Date of Disbursement 10 / 01 / 2007
Mailing Address Post Office Box 52956 333 Texas Street Suite 1900		Amount of Each Disbursement this Period 1000.00
City Shreveport State LA Zip Code 71135	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Jim McCrery		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tim Murphy for Congress</b>		<b>Transaction ID: D911</b> Date of Disbursement 10 / 17 / 2007
Mailing Address PO Box 24551		Amount of Each Disbursement this Period 1000.00
City Pttsburgh State PA Zip Code 15234	Category/ Type	
Purpose of Disbursement Contr.		
Candidate Name Tim F. Murphy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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)  
ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. VOLUNTEERS FOR SHIMKUS</b>		<b>Transaction ID: D910</b>	
Mailing Address PO Box 5458 PO Box 5458		Date of Disbursement 10 / 17 / 2007	
City Springfield	State IL	Zip Code 62705	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contr.		Category/ Type	
Candidate Name John M. Shimkus			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 19			

Full Name (Last, First, Middle Initial) <b>B. Wally Herger for Congress Committee</b>		<b>Transaction ID: D905</b>	
Mailing Address P.O. Box 1500		Date of Disbursement 10 / 01 / 2007	
City Chico	State CA	Zip Code 95927	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contr.		Category/ Type	
Candidate Name Wally Herger			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 02			

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

2000.00

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

15000.00