

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

NEW PAC

ADDRESS (number and street) P.O. BOX 7480

Check if different than previously reported. (ACC)

VISALIA CA 93290

2. FEC IDENTIFICATION NUMBER C00398750

CITY STATE ZIPCODE

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day Post -Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
----------------------------------------	---------------------------------------	----------------------------------------

Election on _____ in the State of _____

5. Covering Period 01 01 2008 through 03 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Toni Dian Nunes

Signature of Treasurer Electronically Filed by Toni Dian Nunes Date 04 12 2008

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

Office Use Only								FEC FORM 3X (Rev. 12/2004)
-----------------	--	--	--	--	--	--	--	--------------------------------------

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NEW PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		72653.63
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	72653.63									
(c) Total Receipts (from Line 19)	45500.00	45500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	118153.63	118153.63								
7. Total Disbursements (from Line 31)	44015.69	44015.69								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	74137.94	74137.94								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
NEW PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	32000.00	32000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	32000.00	32000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	13500.00	13500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	45500.00	45500.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	45500.00	45500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45500.00	45500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2015.69	2015.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2015.69	2015.69
22. Transfers to Affiliated/Other Party Committees.....	15000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22000.00	22000.00
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.....	5000.00	5000.00
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))..	44015.69	44015.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44015.69	44015.69

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)	45500.00	45500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45500.00	45500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2015.69	2015.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2015.69	2015.69

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 23
(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

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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
JE COLEMAN

Mailing Address 2702 SCENIC BEND

City State Zip Code
MODESTO CA 95355

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

Name of Employer Occupation
E. & J. GALLO WINERY CHAIRMAN OF THE BOARD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2008

Transaction ID: SA11AI.5884

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
SUSANN COLEMAN

Mailing Address 2702 SCENIC BEND

City State Zip Code
MODESTO CA 95355

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

Name of Employer Occupation
SELF EMPLOYED DOMESTIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2008

Transaction ID: SA11AI.5882

Amount of Each Receipt this Period
2500.00

C.

Full Name (Last, First, Middle Initial)
EDWARD M KASHIAN

Mailing Address 8365 N FRESNO STREET, SUITE 150

City State Zip Code
FRESNO CA 93720

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

Name of Employer Occupation
LANCE KASHIAN AND COMPANY DEVELOPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2008

Transaction ID: SA11AI.5878

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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 7 / 23
	<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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) JEANNE C KASHIAN		Date of Receipt
	Mailing Address 8365 N FRESNO STREET, SUITE 150		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 24 / 2008
	City	State	Zip Code
	FRESNO	CA	93720
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5879
Name of Employer LANCE KASHIAN AND COMPANY		Occupation DEVELOPER	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"/> 2500.00

B.	Full Name (Last, First, Middle Initial) MING BIN KOU		Date of Receipt
	Mailing Address 1912 E VERNON AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 26 / 2008
	City	State	Zip Code
	VERNON	CA	90058
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5880
Name of Employer RED CHAMBER SEAFOOD		Occupation CHAIRMAN-PRESIDENT	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"/> 5000.00

C.	Full Name (Last, First, Middle Initial) RICHARD V MARTIN		Date of Receipt
	Mailing Address 15926 LA LINDURA		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 26 / 2008
	City	State	Zip Code
	WHITTIER	CA	90603
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5881
Name of Employer RED CHAMBER SEAFOOD		Occupation VICE-PRESIDENT	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"/> 5000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 12500.00
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 8 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
PIRES DAIRY FARMS

Mailing Address 1622 KNIEBES RD

City State Zip Code
GUSTINE CA 95322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
01 / 14 / 2008

Transaction ID: SA11AI.5868

Amount of Each Receipt this Period 1000.00

PARTNERSHIP

B. Full Name (Last, First, Middle Initial)
JOHN B PIRES

Mailing Address 1597 KNIEBES RD

City State Zip Code
GUSTINE CA 95322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
JOHN B PIRES DAIRY FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
01 / 14 / 2008

Transaction ID: SA11AI.5868.0

Amount of Each Receipt this Period 500.00

PARTNER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CECILIA C PIRES

Mailing Address 1597 KNIEBES RD

City State Zip Code
GUSTINE CA 95322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
JOHN B PIRES DAIRY FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
01 / 14 / 2008

Transaction ID: SA11AI.5868.1

Amount of Each Receipt this Period 500.00

PARTNER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) 1000.00

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 9 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ROBERT E SMITTCAMP

Mailing Address 5811 N FORKNER AVE

City FRESNO State CA Zip Code 93711

FEC ID number of contributing federal political committee. C

Name of Employer LYONS MAGNUS Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 12 / 2008
Transaction ID: SA11AI.5877

Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
JOE D SOARES

Mailing Address 11076 N VINCENT RD

City TURLOCK State CA Zip Code 95380

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 12 / 2008
Transaction ID: SA11AI.5872

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
TERESA SOARES

Mailing Address 11076 N VINCENT RD

City TURLOCK State CA Zip Code 95380

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 12 / 2008
Transaction ID: SA11AI.5873

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 6000.00

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 10 / 23
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
TULE RIVER TRIBAL COUNCIL

Mailing Address P.O. BOX 589

City State Zip Code
PORTERVILLE CA 93258

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2008

Transaction ID: SA11AI.5948

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	32000.00

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

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

FOR LINE NUMBER: PAGE 11 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	8

Transaction ID: SA11C.5888

Mailing Address 101 Constitution Ave NW
Suite 400W

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Amount of Each Receipt this Period
2500.00

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

B. Full Name (Last, First, Middle Initial)
CLEAR CHANNEL COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	8

Transaction ID: SA11C.5889

Mailing Address 200 E. Basse Road

City State Zip Code
San Antonio TX 78209

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Amount of Each Receipt this Period
1000.00

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

C. Full Name (Last, First, Middle Initial)
EDISON INTERNATIONAL PAC

Date of Receipt

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

Transaction ID: SA11C.5890

Mailing Address 520 S GRAND AVENUE SUITE 700

City State Zip Code
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Amount of Each Receipt this Period
2500.00

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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 12 / 23
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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)
NEW PAC

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
02 / 13 / 2008

Transaction ID: SA11C.5874

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.

Mailing Address P. O. Box 718

City State Zip Code
Winston-Salem NC 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2008

Transaction ID: SA11C.5876

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	13500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 23

<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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) CHASE CARD SERVICE	Transaction ID: SB21B.5893 Date of Disbursement
	Mailing Address P.O. BOX 94014	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City PALANTINE State IL Zip Code 60094	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC FUNDRAISER EVENT: CATERING	<input type="text" value="523.43"/>
	Candidate Name	<input type="text" value="007"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB	Transaction ID: SB21B.5893.0 Date of Disbursement
	Mailing Address 300 FIRST STREET, SE	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC FUNDRAISER EVENT: CATERING	<input type="text" value="523.43"/>
	Candidate Name	<input type="text" value="007"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) CHASE CARD SERVICE	Transaction ID: SB21B.5895 Date of Disbursement
	Mailing Address P.O. BOX 94014	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City PALANTINE State IL Zip Code 60094	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL	<input type="text" value="357.87"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="881.30"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON <hr/> Mailing Address 2340 S TERRACE ST <hr/> City VISALIA State CA Zip Code 93277 <hr/> Purpose of Disbursement CONSULTING Candidate Name 001 Category/Type <hr/> Office Sought: <input 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: District:	Transaction ID: SB21B.5898 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">200.00</div>
B.	Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON <hr/> Mailing Address 2340 S TERRACE ST <hr/> City VISALIA State CA Zip Code 93277 <hr/> Purpose of Disbursement TRAVEL Candidate Name 002 Category/Type <hr/> Office Sought: <input 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: District:	Transaction ID: SB21B.5899 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">79.09</div>
C.	Full Name (Last, First, Middle Initial) CLARISSA N HENDERSON <hr/> Mailing Address 2340 S TERRACE ST <hr/> City VISALIA State CA Zip Code 93277 <hr/> Purpose of Disbursement CONSULTING Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5900 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">200.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">479.09</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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 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

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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address 2340 S TERRACE ST

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
PAC FUNDRAISER EVENT: COSTS

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5904
Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address 2340 S TERRACE ST

City VISALIA State CA Zip Code 93277

Purpose of Disbursement
OFFICE EXP: DOMAIN REGISTRATION

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5907
Date of Disbursement

03 / 20 / 2008

Amount of Each Disbursement this Period

34.95

SUBTOTAL of Disbursements This Page (optional) ►

234.95

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

1595.34

**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 16 / 23

<input type="checkbox"/> 21b	<input checked="" 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

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)
NEW PAC

A.

Full Name (Last, First, Middle Initial)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Transaction ID: SB22.5921

Date of Disbursement

Mailing Address 320 FIRST STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	8

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

15000.00

Purpose of Disbursement
TRANSFER

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

15000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) CHRIS MYERS FOR CONGRESS Mailing Address 112 HIGH STREET City MOUNT HOLLY State NJ Zip Code 08060 Purpose of Disbursement 011 Candidate Name CHRIS MYERS 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: NJ District: 03	Transaction ID: SB23.5942 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 8	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; width: 100%;">1000.00</div>
B.	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT VITO FOSSELLA Mailing Address 34 DUMONT AVENUE 34 Dumont Ave City STATEN ISLAND State NY Zip Code 10305 Purpose of Disbursement 011 Candidate Name VITO FOSSELLA 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: NY District: 13	Transaction ID: SB23.5934 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 8	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; width: 100%;">1000.00</div>
C.	Full Name (Last, First, Middle Initial) DUNCAN D HUNTER FOR CONGRESS Mailing Address PO BOX 3917 City LA MESA State CA Zip Code 91944 Purpose of Disbursement 011 Candidate Name DUNCAN D HUNTER 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: 52	Transaction ID: SB23.5927 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 8	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; width: 100%;">1000.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">3000.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

**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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) GODDARD FOR CONGRESS	Transaction ID: SB23.5926
	Mailing Address PO BOX 9460	Date of Disbursement 03 / 12 / 2008
	City WARNER ROBINS State GA Zip Code 31095	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name RICHARD NEIL GODDARD	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE	Transaction ID: SB23.5920
	Mailing Address 911 WELSH AYRES WAY	Date of Disbursement 03 / 05 / 2008
	City DOWNINGTOWN State PA Zip Code 19335	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name JIM GERLACH	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOHANNES FOR SENATE INCORPORATED	Transaction ID: SB23.5901
	Mailing Address 1201 O STREET SUITE 101	Date of Disbursement 02 / 21 / 2008
	City LINCOLN State NE Zip Code 68506	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name MICHAEL O JOHANNES	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5000.00
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 19 / 23

<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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) KNOLLENBERG FOR CONGRESS COMMITTEE	Transaction ID: SB23.5938 Date of Disbursement 03 / 13 / 2008
	Mailing Address 31000 Telegraph Road #110	Amount of Each Disbursement this Period 1000.00
	City Bingham Farms State MI Zip Code 48025	
	Purpose of Disbursement	011 Category/Type
	Candidate Name JOSEPH K. KNOLLENBERG	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MANION FOR CONGRESS	Transaction ID: SB23.5931 Date of Disbursement 03 / 12 / 2008
	Mailing Address PO BOX 28	Amount of Each Disbursement this Period 1000.00
	City DOYLESTOWN State PA Zip Code 18901	
	Purpose of Disbursement	011 Category/Type
	Candidate Name TOM MANION	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) OBERWEIS FOR CONGRESS	Transaction ID: SB23.5916 Date of Disbursement 02 / 21 / 2008
	Mailing Address 335 N River Road Ste 203	Amount of Each Disbursement this Period 1000.00
	City Batavia State IL Zip Code 60510	
	Purpose of Disbursement	011 Category/Type
	Candidate Name JAMES D OBERWEIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) PEOPLE FOR ENGLISH	Transaction ID: SB23.5947
	Mailing Address PO BOX 1940	Date of Disbursement 03 / 12 / 2008
	City ERIE State PA Zip Code 16507	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/Type
	Candidate Name PHILIP S. ENGLISH	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) PEOPLE WITH HART INC	Transaction ID: SB23.5946
	Mailing Address P.O. Box 435	Date of Disbursement 03 / 31 / 2008
	City Wexford State PA Zip Code 15090	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/Type
	Candidate Name MELISSA A HART	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) PORTER FOR CONGRESS	Transaction ID: SB23.5925
	Mailing Address PO Box 26087	Date of Disbursement 03 / 05 / 2008
	City Las Vegas State NV Zip Code 89126	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	011 Category/Type
	Candidate Name JON C SR PORTER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) SCALISE FOR CONGRESS 08 Mailing Address 3100 Ridgelake Suite 301 City Metairie State LA Zip Code 70002 Purpose of Disbursement 011 Candidate Name STEVE MR. SCALISE 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: LA District: 01	Transaction ID: SB23.5915 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 8	
		Amount of Each Disbursement this Period	2000.00
B.	Full Name (Last, First, Middle Initial) SCHOCK FOR CONGRESS Mailing Address PO BOX 10555 City PEORIA State IL Zip Code 61612 Purpose of Disbursement 011 Candidate Name AARON SCHOCK 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: 18	Transaction ID: SB23.5908 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8	
		Amount of Each Disbursement this Period	2000.00
C.	Full Name (Last, First, Middle Initial) SCOTT GARRETT FOR CONGRESS Mailing Address P.O. Box 905 City Newton State NJ Zip Code 07860 Purpose of Disbursement 011 Candidate Name SCOTT GARRETT 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: NJ District: 05	Transaction ID: SB23.5939 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 8	
		Amount of Each Disbursement this Period	1000.00

SUBTOTAL of Disbursements This Page (optional)	5000.00
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 / 23

<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

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)
NEW PAC

A.

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

Transaction ID: SB23.5909

Date of Disbursement

Mailing Address PO BOX 685

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	0	8

City State Zip Code
SARATOGA SPRINGS NY 12866

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

011
Category/ Type

Candidate Name
SANDY TREADWELL

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

22000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 23

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

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)
NEW PAC

A.	Full Name (Last, First, Middle Initial) JOHN T DOOLITTLE LEGAL EXPENSE TRUST		Transaction ID: SB29.5923	
	Mailing Address P.O. BOX 99		Date of Disbursement MM / DD / YYYY 02 / 27 / 2008	
	City OAKTON	State VA	Zip Code 22124	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement		012	
	Candidate Name		Category/ Type	
	Office Sought: <input 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:	District:		

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	5000.00