

RECEIVED
FEC MAIL CENTER

2008 JUL 14 PM 12:08

FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

C O N N E C T I C U T , B A N K E R S , A S S O C I A T I O N

P O L I T I C A L A C T I O N C O M M I T T E E

ADDRESS (number and street)

1 0 W A T E R S I D E D R I V E



Check if different than previously reported. (ACC)

F A R M I N G T O N C T 0 6 0 3 2

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 0 0 1 0 8 6 0 5

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 Year-End 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 (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

(d)

30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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

Gerald M. Noonan

Signature of Treasurer

Gerald M. Noonan

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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

28039771909

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

MM	DD	YY
04	01	2008

 To:

MM	DD	YY
06	30	2008

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	<table border="1" style="border-collapse: collapse;"><tr><td>YY</td><td>MM</td><td>DD</td></tr><tr><td>20</td><td>08</td><td></td></tr></table>	YY	MM	DD	20	08		<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>41</td><td>71</td><td>98</td></tr></table>	MM	DD	YY	41	71	98
YY	MM	DD												
20	08													
MM	DD	YY												
41	71	98												
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>41</td><td>71</td><td>98</td></tr></table>	MM	DD	YY	41	71	98	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>41</td><td>71</td><td>98</td></tr></table>	MM	DD	YY	41	71	98
MM	DD	YY												
41	71	98												
MM	DD	YY												
41	71	98												
(c) Total Receipts (from Line 19)	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>00</td><td></td><td></td></tr></table>	MM	DD	YY	00			<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>00</td><td></td><td></td></tr></table>	MM	DD	YY	00		
MM	DD	YY												
00														
MM	DD	YY												
00														
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>41</td><td>71</td><td>98</td></tr></table>	MM	DD	YY	41	71	98	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>41</td><td>71</td><td>98</td></tr></table>	MM	DD	YY	41	71	98
MM	DD	YY												
41	71	98												
MM	DD	YY												
41	71	98												
7. Total Disbursements (from Line 31).....	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>23</td><td>74</td><td>18</td></tr></table>	MM	DD	YY	23	74	18	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>23</td><td>74</td><td>18</td></tr></table>	MM	DD	YY	23	74	18
MM	DD	YY												
23	74	18												
MM	DD	YY												
23	74	18												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>17</td><td>97</td><td>80</td></tr></table>	MM	DD	YY	17	97	80	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>17</td><td>97</td><td>80</td></tr></table>	MM	DD	YY	17	97	80
MM	DD	YY												
17	97	80												
MM	DD	YY												
17	97	80												
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>00</td><td></td><td></td></tr></table>	MM	DD	YY	00			<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>00</td><td></td><td></td></tr></table>	MM	DD	YY	00		
MM	DD	YY												
00														
MM	DD	YY												
00														
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>00</td><td></td><td></td></tr></table>	MM	DD	YY	00			<table border="1" style="border-collapse: collapse;"><tr><td>MM</td><td>DD</td><td>YY</td></tr><tr><td>00</td><td></td><td></td></tr></table>	MM	DD	YY	00		
MM	DD	YY												
00														
MM	DD	YY												
00														

28039771910

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	4

 /

D	D
0	1

 /

Y	Y	Y	Y	Y	Y
2	0	0	8		

 To:

M	M
0	6

 /

D	D
3	0

 /

Y	Y	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
 - (i) Itemized (use Schedule A).....
 - (ii) Unitemized
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0.0
0.0
0.0
0.0
0.0

0.0
0.0
0.0
0.0
0.0

- (b) Political Party Committees
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0.0

0.0

12. Transfers From Affiliated/Other Party Committees.....

0.0

0.0

13. All Loans Received.....

0.0

0.0

14. Loan Repayments Received.....

0.0

0.0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0.0

0.0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0.0

0.0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0.0

0.0

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

0.0

0.0

- (b) Levin Funds (from Schedule H5).....

0.0

0.0

- (c) Total Transfers (add 18(a) and 18(b))..

0.0

0.0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0.0

0.0

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0.0

0.0

28039771911

**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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	00	00
(ii) Non-Federal Share	00	00
(b) Other Federal Operating Expenditures	374 18	374 18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	374 18	374 18
22. Transfers to Affiliated/Other Party Committees	00	00
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000 00	2000 00
24. Independent Expenditures (use Schedule E)	00	00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	00	00
26. Loan Repayments Made	00	00
27. Loans Made	00	00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	00	00
(b) Political Party Committees	00	00
(c) Other Political Committees (such as PACs)	00	00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	00	00
29. Other Disbursements	00	00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	00	00
(ii) "Levin" Share	00	00
(b) Federal Election Activity Paid Entirely With Federal Funds	00	00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	00	00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2374 18	2374 18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2374 18	2374 18

28039771912

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0 0	0 0
34. Total Contribution Refunds (from Line 28(d))	0 0	0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0 0	0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3 7 4 1 8	3 7 4 1 8
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 0	0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3 7 4 1 8	3 7 4 1 8

28039771913

**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 1 OF 1

<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)

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
06	24	2008

A.

PYNE DAVIDSON COMPANY

Mailing Address

237 WESTON STREET

City

HARTFORD

State

CT

Zip Code

06120

Purpose of Disbursement

PRINTING OF FUND RAISING SUPPLIES

003

Amount of Each Disbursement this Period

374.18

Candidate Name

N/A

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

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

374.18

28039771914

**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 1 OF 1

<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)

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
05	29	2008

A.

LARSON FOR CONGRESS

Mailing Address

P.O. Box 261172

City

HARTFORD

State

CT

Zip Code

06126

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

Candidate Name

JOHN B. LARSON

0 1 1

Category/
Type

Amount of Each Disbursement this Period

2	0	0	0	0
---	---	---	---	---

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: CT

District: 1 st

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--	--	--	--	--

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--	--	--	--	--

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

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

--	--	--	--	--

2	0	0	0	0
---	---	---	---	---

28039771915

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/8/08
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Signature]
 PREPARER
 (3/2005)

7/14/08
 DATE PREPARED

28059771916