FEC FORM 3X	AN	PORT OF D DISBU Other Than An	RSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING LAE	-//	ample:If typing er the lines	, type			
American Nurses A								
ADDRESS (number and	street)	15 Georgia Avenue						
Check if differ than previousl reported. (AC	ent L⊥ / LSilv	ite 400 / / / ver Spring / / / /				MD		3492
2. FEC IDENTIFICAT	ION NUMBER	▼			S	STATE	ZIPCO	DE 🔺
C00017525			3. IS THIS REPORT		NEW N) OR	X AN (A	MENDED)	
July 15 Quarterly October Quarterly January 2 Quarterly July 31 M Report(N Year Only	ports: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election	(d) 30-Day Post -Elect Report for t	he:		12C)	X Sep	12G) in the State of	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer	reasurer <u>M</u> Electronically I	lary Behrens Filed by Mary Be	ny knowledge hrens		Da	ate 09	2008	2008
NOTE : Submission of f	alse, erroneous,	or incomplete infor	mation may si	ibject the pers	on signing this	Report to the	FEC FOR	M 3X
Only							(Rev. 12/20	04)

lmage#	28933343913	
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6.

8.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Nurses Association PAC MM DD YW м м D D 08 01 2008 08 31 2008 Report Covering the Period: From: To: **COLUMN A** COLUMN B **This Period** Calendar Year-to-Date (a) Cash on Hand 2008 209224.16 January 1 (b) Cash on Hand at 179540.79 Begining of Reporting Period 21003.32 307378.52 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 200544.11 516602.68 6(a) and 6(c) for Column B) 27446.75 343505.32 7. Total Disbursements (from Line 31) Cash on Hand at Close of **Reporting Period** 173097.36 173097.36 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed то the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed ΒY the committee (Itemize all on

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

Schedule C and/or Schedule D)

For further information contact:

0.00

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

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

FE6AN026

Image# 28933343914		DETAILED SUMMARY PAGE OF RECEIPTS	
	FEC Form 3X (Rev. 06/2004)	OF NECEIPIS	Page 3
V	Vrite or Type Committee Name American Nurses Association PAC		
R	Report Covering the Period: From:	M M D D Y	M M D D Y Y Y Y </th
	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)	1140.00	44712.50
	(ii) Unitemized	19819.46	261903.51
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	20050.46	306616.01
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	20959.46	306616.01
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14. 15.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(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.)	43.86	762.51
18.	Transfers from Non-Federal and Levin Fun	lds	
	(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))	21003.32	307378.52
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	21003.32	307378.52

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DETAILED SUMMARY PAGE

II. DISBURSEMENTS	COLUMN A	COLUMN B
1. Operating Expenditures:	Total This Period	Calendar Year-to-Date
(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	2446.75	21436.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) >	2446.75	21436.38
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
 Contributions to Federal Candidates/Committees and Other Political Committees 	25000.00	308111.90
4. Independent Expenditure (use Schedule E)	0.00	13882.04
 Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) 	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
 Refunds of Contributions To: (a) Individuals/Persons Other (b) Individuals/Persons Other 	0.00	75.00
Than Political Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c)) 🕨	0.00	75.00
9. Other Disbursements	0.00	0.00
 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
1. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	27446.75	343505.32
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	27446.75	343505.32

Image# 28933343916

DETAILED SUMMARY PAGE

	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)	20959.46	306616.01
34.	Total Contribution Refunds (from Line 28(d))	0.00	75.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	20959.46	306541.01
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2446.75	21436.38
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	2446.75	21436.38

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: PAGE 6 / 1 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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) American Nurses Association PAC NAME OF COMMITTEE (In Full) American Nurses Association PAC A. Full Name (Last, First, Middle Initial) Mailing Address Date of Receipt Mailing Address Hc 73 Box 70 Mailing Address	2 3 17 ns e. 0 8 2E4B3BA
ITEMIZED RECEIPTS for each category of the Detailed Summary Page Image: Check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Nurses Association PAC Full Name (Last, First, Middle Initial) Ms. Patricia C. Owens Mailing Address Hc 73 Box 70	3 17 ns e.) 8 2E4B3BA
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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) American Nurses Association PAC Full Name (Last, First, Middle Initial) Ms. Patricia C. Owens Mailing Address Hailing Address Hc 73 Box 70	3 17 ns e.) 8 2E4B3BA
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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) American Nurses Association PAC Full Name (Last, First, Middle Initial) Mailing Address Hc 73 Box 70 Date of Receipt	ns e.) 8 2E4B3BA
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) American Nurses Association PAC Full Name (Last, First, Middle Initial) Ms. Patricia C. Owens Mailing Address Hc 73 Box 70	e.) 8 2E4B3BA
NAME OF COMMITTEE (In Full) American Nurses Association PAC Full Name (Last, First, Middle Initial) Ms. Patricia C. Owens Mailing Address Hc 73 Box 70) 8 2E4B3BA
American Nurses Association PAC Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address Hc 73 Box 70) 8 2E4B3BA
Full Name (Last, First, Middle Initial) Ms. Patricia C. Owens Mailing Address Hc 73 Box 70 M M / D D / Y Y Y) 8 2E4B3BA
Ms. Patricia C. Owens Date of Receipt) 8 2E4B3BA
Mailing Address Hc 73 Box 70) 8 2E4B3BA
Mailing Address Hc /3 Box /0) 8 2E4B3BA
City State Zip Code Transaction ID: A264A0F42692	
Marietta OK 73448-9520 Amount of Each Receipt this Perio	D
	1 1
FEC ID number of contributing federal political committee. C 70.	00
Name of Employer Occupation Mercy Love Co. Rural Heal-	
th Clinic Nurse	
Receipt For: Aggregate Year-to-Date	
Primary General 470.00	
Other (specify)	
Full Name (Last, First, Middle Initial)	
Ms. Tricia J. Rigney Date of Receipt	
Mailing Address 5412 Paniolo Place	
City State Zip Code Transaction ID: AB464FE3A93	1845C3
Honolulu HI 96821 Amount of Each Receipt this Perio	
FEC ID number of contributing federal political committee.	00
Name of Employer Occupation Hawaii Pacific University Acception	
Associate Professor Nursing	
Receipt For: Aggregate Year-to-Date ▼ Primary General	
Other (specify) \checkmark 400.00	
Full Name (Last, First, Middle Initial) Ms. Janet Moll Date of Receipt	
Mailing Address 5315 Merrimac Ave	
City State Zip Code Transaction ID: A113918D8AD	
Dallas TX 75206-5827 Amount of Each Receipt this Perio	
FEC ID number of contributing 500.	00
federal political committee.	
Name of Employer Occupation Visiting Nurse Assoc CHIEF OF NURSING	
Receipt For: Aggregate Year-to-Date ▼	
Primary General 500.00	
Other (specify)	
SUBTOTAL of Receipts This Page (optional)	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 7 / 17 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Nurses Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. John B. Strange			Date of Receipt
	Mailing Address 137 Dickinson Ln			
	City	State	Zip Code	08122008 Transaction ID: A7A36DC1A627D454E9B4
	Wilmington	DE	19807-3139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer Anesthesia Services	Occupatio RN	n	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 240.00	
B.	Full Name (Last, First, Middle Initial) Dr. Sara L Jarrett			Date of Receipt
	Mailing Address 2751 S. Macon Circle			M M / D D / Y Y Y Y 08 12 2008
	City	State	Zip Code	Transaction ID: ADD745B30F5E64BFBA8E
	Aurora	CO	80014-3027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Regis University	Occupatio Professo		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	►		370.00
TOTAL This Period (last page this line number only)	►		1140.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 17 (check only one) 11a 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Nurses Association PAC			
Α.	Full Name (Last, First, Middle Initial) Bank of America			Date of Receipt
	Mailing Address PO Box 27025			M M / D D / Y
	City	State	Zip Code	Transaction ID: A7F70CBA33E264649A64
	Richmond	VA	23261	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.86
	Name of Employer	Occupatio	n	- interest
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 750.17	

SUBTOTAL of Receipts This Page (optional)	►	43.86
TOTAL This Period (last page this line number only)	►	43.86

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	NUMBER: PAGE 9 / 17 y one) 22 23 24 25 26 28a 28b 28c 29 30b
	ny Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) ' American Nurses Association PAC			for the purpose of soliciting contributions
∠ a.	Full Name (Last, First, Middle Initial) Bank of America Merchant Services			Transaction ID: B0FB8E849B73A4C268F Date of Disbursement 0 8 ^M / ^D 2 9 / ^Y 2 0 0 8
	Mailing Address PO Box 2485 City Spokane Purpose of Disbursement credit card and online lockbox fees	State Zip Code WA 99210-2485		Amount of Each Disbursement this Period
	Candidate Name Office Sought: House Senate President Disburs	ement For: Primary General Other (specify) ▼	Category/ Type	
— B.	State: District: Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 27025			Transaction ID: B45A490588D2D490EB2 Date of Disbursement
	City Richmond Purpose of Disbursement bank fees	State Zip Code VA 23261		Amount of Each Disbursement this Period 2324.69
	Candidate Name Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	►	2446.75
TOTAL This Period (last page this line number only)	►	2446.75
FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)

ITEMIZED DISSURSEMENTS or death category of me patial dummary Page 12 b 12 c 12 d <	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)					IE NUMBER: PAGE 10 / 17									
r 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) American Nurses Association PAC Full Name (Last, First, Middle Initial) JOHN LEWIS FOR CONGRESS COMMITtee Mailing Address PO Box 2323 City Attanta GA 30301 Purpose of Disbursement Catagory/ Rep. John Lewis City CONGRESS Mailing Address 1924 Oakwood St City State MD 20748-5553 Purpose of Disbursement Catagory/ Tampican Units BAGD723D10AB4 Date of Disbursement this Perio Catagory/ Rep. John Lewis City State Size CONGRESS Purpose of Disbursement Catagory/ Termsaction ID: E3A6D723D10AB4 Date of Disbursement for: 2008 City State Size CONGRESS Mailing Address 1924 Oakwood St City State Size Congress Mailing Address PO Box 226 City State Size CONGRESS Purpose of Disbursement For: 2008 City Congress Mailing Address PO Box 226 City State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 City State MD Size City Y State Size Congress Mailing Address PO Box 226 Pirpose of Disbursement For: 2008 Pirpose of Disbursement For: 2008 City Size City Size City Size Congress Mailing Address PO Box 226 Pirpose of Disbursem	TEMIZED DISBURSEMENTS			21b	22				1	\square			26 30			
American Nurses Association PAC Full Name (Last, First, Middle Initial) JOHN LEWIS FOR CONGRESS COMMITtee Mailing Address PO Box 2323 City State Atlanta GA Address PO Box 2323 City State Atlanta GA Candidate Name Gategory/ Type Office Sought: X House District: 05 Disbursement For: 2008 Primary X General Other (specify) Transaction ID: B3A6D723D10AB4 District: 05 Disbursement For: Pul Name (Last, First, Middle Initial) Primary PAYNE FOR CONGRESS Mailing Address Mailing Address 1924 Oakwood St City State Category/ Temple Hills MI Mailing Address 1924 Oakwood St City State Coldate Name Disbursement For: Prepose of Disbursement Category/ Type Office Sought: House District: 10 Disbursement For: Propose of Disbursement Category/ Type					for the	ourpo	se of s					s				
Full Name (Last, First, Middle Initial) JOHN LEWIS FOR CONGRESS COMMITtee Transaction ID: B8B4ECDC940B14 Mailing Address PO Box 2323 Image: Conder and the second s	NAME OF COMMITTEE (In Full)															
JOHN LEWIS FOR CONGRESS COMMITtee Date of Disbursement Mailing Address PO Box 2323 City State Zip Code Atlanta GA 30301 Purpose of Disbursement	American Nurses Association PAC															
City State Zip Code Atlanta GA 30301 Purpose of Disbursement		llTtee			Dat	e of D	Disburs	eme					1AC			
Atlanta GA 30301 Purpose of Disbursement	Mailing Address PO Box 2323						/ D	15	/ Y	ž	o ò e	B ^Y				
Candidate Name Category/ Type Citice Sought: X Aniling Address 1924 Oakwood St City State Candidate Name Disbursement For: Yeight X fate Yeight X fate Office Sought: X Persident Other (specify) State: GA Mailing Address 1924 Oakwood St City State Purpose of Disbursement Category/ Type Office Sought: X House Disbursement For: Candidate Name President Rep. Donald M. Payne Primary Office Sought: X President Other (specify) State: NJ District: 10 Full Name (Last, First, Middle Initial) President Peters for Congress Mailing Address Mailing Address PO Box 226 City Bloomfield Hills Mailing Address PO Box 226 Office Sought: Y President Category/ Type Office Sought: House					Am	ount	of Each	ו Dis	sburse				d			
Rep. John Lewis Type Office Sought: X House Disbursement For: 2008 President Other (specify) State: GA District: 05 Full Name (Last, First, Middle Initial) PAYNE FOR CONGRESS Mailing Address 1924 Oakwood St City State: Zip Code Temple Hills MD 20748-5653 Purpose of Disbursement Interview Candidate Name State 2008 President Disbursement For: 2008 Office Sought: X House Disbursement For: 2008 Office Sought: X House Disbursement For: 2008 Office Sought: X House Disbursement For: 2008 Purpose of Disbursement Other (specify) ▼ Transaction ID: BF4A2071552604E Full Name (Last, First, Middle Initial) Peters for Congress Transaction ID: BF4A2071552604E Bioomfield Hills Mill 48303-0226 Mailing Address PO Box 226 City Senate Disbursement For: 2008 Amount of Each Disbursement this Perio Bioomfield Hills	Purpose of Disbursement		v							10	0.00	0				
Senate President State: GA District: 05 Full Name (Last, First, Middle Initial) PAYNE FOR CONGRESS Mailing Address 1924 Oakwood St City State: Temple Hills MD Purpose of Disbursement Category/ Type Office Sought: X House President Disbursement For: 2008 President Other (specify) MI Address PO Box 226 City State: XI House Disbursement Category/ Type Office Sought: X House President Disbursement For: City District: 10 Full Name (Last, First, Middle Initial) Peters for Congress Mailing Address PO Box 226 City Bloomfield Hills Mail Anount of Each Disbursement this Perio Category/ Type Type Office Sought: X House Disbursement Category/ Type City Senate President Senate Other (specify) Category/ Type <td></td>																
PAYNE FOR CONGRESS Table of Disbursement Mailing Address 1924 Oakwood St City State Zip Code Temple Hills MD 20748-5653 Purpose of Disbursement Category/ Type Cardidate Name Rep. Donald M. Payne Disbursement For: 2008 Office Sought: X House Senate Disbursement For: 2008 President Other (specify) ▼ Transaction ID: BF4A2071552604E Date of Disbursement Other (specify) ▼ Transaction ID: BF4A2071552604E Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Disbursement Virus State: NJ District: 109 State Zip Code Mailing Address PO Box 226 Amount of Each Disbursement this Perio Disbursement Mailing Address PO Box 226 Amount of Each Disbursement this Perio Amount of Each Disbursement this Perio City State Zip Code Amount of Each Disbursement this Perio Purpose of Disbursement Category/ Type Y 2 0 0 8 Amount of Each Disbursement this Perio Cardidate Name Gary Peters Senate President Disbursement For:	Senate President	Primary X General			_											
City State Zip Code Temple Hills MD 20748-5653 Purpose of Disbursement Category/ Candidate Name Senate Disbursement For: Candidate Name President Disbursement For: State: NJ District: 10 Other (specify) Full Name (Last, First, Middle Initial) Peters for Congress Mailing Address PO Box 226 City State Zip Code Bloomfield Hills MI 48303-0226 Purpose of Disbursement Category/ City State Zip Code Bloomfield Hills MI 48303-0226 Purpose of Disbursement Category/ Candidate Name Category/ Gary Peters Disbursement For: 2008 Office Sought: X House Disbursement For: Office Sought: X House Disbursement For: Office Sought: X House Disbursement For: State: MI District: 09 Other (specify) V										D723	D10	AB4	84			
Temple Hills MD 20748-5653 Purpose of Disbursement	Mailing Address 1924 Oakwood St				0 ^M	8	/ D.	15	/ Y	ź	٥ò٤	8 ^Y				
Candidate Name Category/ Type Candidate Name Disbursement For: 2008 Office Sought: X House Disbursement For: 2008 State: NJ District: 10 V State: NJ Disbursement For: 2008 Full Name (Last, First, Middle Initial) Peters for Congress Transaction ID: BF4A2071552604E Mailing Address PO Box 226 V Y					Am	ount	of Each	n Dis	sburse	ment	this I	Perio	d			
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Peters for Congress Initiadiction Difference of Disbursement Mailing Address PO Box 226 City State Zip Code Bloomfield Hills MI 48303-0226 Purpose of Disbursement Category/ Type Candidate Name Gary Peters Disbursement For: 2008 Office Sought: X House President Other (specify) ✓	Senate President	Primary X General			_											
City State Zip Code Bloomfield Hills MI 48303-0226 Purpose of Disbursement 2500.00 Candidate Name Category/ Type Office Sought: X Y House Primary X Other (specify) ▼ State: MI District: 09										2071	5526	604E	EEC			
Bloomfield Hills MI 48303-0226 Purpose of Disbursement	Mailing Address PO Box 226				^M	8	/ D.	15	/ Y	ž	o ò a	8 ^Y				
Candidate Name Gary Peters Category/ Type Office Sought: X X House Disbursement For: 2008 Senate Primary X General Other (specify) V					Am	ount	of Each	n Dis	sburse	ment	this I	Perio	d			
Gary Peters Type Office Sought: X House Disbursement For: 2008 Senate Primary X President Other (specify) State: MI District: 09	Purpose of Disbursement		U							25	0.00	0				
Senate Primary X General President Other (specify) ▼																
	Senate President	Primary X General														
SUBTOTAL of Disbursements This Page (optional)		al)		•						450	0.0	0				

	Use separate schedule(s)				R LIN			PAGE 11/17									
	EMIZED DISBURSEMENTS		JRSEMENTS for each category of the Detailed Summary Page				21b 27	R	22 28a		23 28b	F	24 280		25		26 301
r for commercial pur	d from such Reports poses, other than usir IITTEE (In Full) es Association PA	ng the name							the pu		se of		iting (cor	ntributi	ons	
,	First, Middle Initial)													D	1427:	36C4	4AE
Rush Holt for C	ongress									of [M	Disbur			Y	Y	y y	1
Mailing Address	PO Box 782								08			15			ž0	8	
City Pennington			itate NJ	Zip Code 08534					Amou	int	of Eac	h Di	sburs	em	nent th		iod
Purpose of Disbur	rsement					v			L.						1000	.00	
Candidate Name Rep. Rush Holt						ateg Typ	ory/ e										
Office Sought: State: NJ	X House Senate President District: 12		nent For: Primary Other (spe	2008 X General ecify) ▼	1												
Full Name (Last, F Wexler for Con											tion IE Disburs			385	50A77	70304	41C2
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City Boca Raton			itate L	Zip Code 33431-6320)				Amou	Int	of Eac	h Di	sburs	err	nent th	is Per	iod
Purpose of Disbur	rsement					v			L.						1000	.00	
Candidate Name Rep. Robert W	exler					ateg Typ	ory/ e										
Office Sought:	X House Senate President District: 19		nent For: Primary Other (spe	2008 X General ecify) ▼	1												
· · ·	First, Middle Initial)	1									tion II Disburs			217	\89F2	28374	4CAI
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Purpose of Disbur	rsement														1000	.00	
Candidate Name Rep. John Con	yers, Jr.					ateg Typ	ory/ e										
Office Sought: State: MI	X House Senate President District: 14		nent For: Primary Other (spe	2008 X General ecify) ▼													
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NAME OF COMMITTEE (In Full)	g																	
American Nurses Association F	PAC																	
Full Name (Last, First, Middle Initial) Blumenauer For Congress								Frans Date o					75EC	A634	64C0			
Mailing Address 830 NE Holla Ste 105	day						_	0 ^M 8	M /	D 1	^D 5	/ Y	ž o	0 Å 8 Ì	ſ			
City Portland		State OR	Zip Code 97232					Amou	nt of	Each) Dis	burse	ment t	his Pe	eriod			
Purpose of Disbursement								L.					100	0.00				
Candidate Name Rep. Earl Blumenauer					ategor Type	y/												
Office Sought: X House Senate President State: OR District: 03	Disburse	ement For: Primary Other (spe	2008 X Genera ecify) ▼															
Full Name (Last, First, Middle Initial)													3C504	4360E	D4A0A			
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Mailing Address 1707 Prince S	St #5							08		1	5		20	08				
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Candidate Name Rep. Frank A. LoBiondo					ategor <u>:</u> Type	y/												
Office Sought: X House Senate President State: NJ District: 02	Disburse	ement For: Primary Other (spe	2008 X Genera ecify) ▼															
Full Name (Last, First, Middle Initial) Kildee For Congress								Frans Date o					53B33	3B69(04916			
Mailing Address PO Box 317								0 ^M 8	M /	D	5	/ Y	ž o	0 Å 8 Ì	ſ			
City Flint		State MI	Zip Code 48501					Amou	nt of	Each	Dis	burse	ment t	his Pe	eriod			
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Candidate Name Rep. Dale E. Kildee					ategor Type	y/												
Office Sought: X House Senate President	Disburse	ement For: Primary Other (spe	2008 X General ecify)															
State: MI District: 05																		
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FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LINE NUMBER: PAGE 13 / 17 check only one)								
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22	2 [X 23 28b	F	24 28c	2		26
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NAME OF COMMITTEE (In Full)											
American Nurses Association PAC											
Full Name (Last, First, Middle Initial) A Lot of People for Dave Obey						action II f Disbur			9F4C	5E66	4727
Mailing Address PO Box 1322				0	8	M / D	1 ^D	/ Y	ź0	08 [°]	
City Wausau	State Zip Code WI 54402-1322			An	nour	nt of Eac	h Di	sburse	ment th	is Per	iod
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Candidate Name Rep. Dave R. Obey	I.	Cateo Typ									
Office Sought: X House Disburs Senate President State: WI District: 07	sement For: 2008 Primary X General Other (specify) ▼										
Full Name (Last, First, Middle Initial) COMMITTEE FOR BART GORDON, The	9			-		action II f Disbur	-		E989BI	BA67	4BE3
Mailing Address PO Box 2008				0	8	M / D	2 ¹	/ Y	ž0	08 [°]	
City Murfreesboro	State Zip Code TN 37133			An	nour	nt of Eac	h Di	sburse	ment th	is Per	iod
Purpose of Disbursement	[1 L					1000	0.00	
Candidate Name Rep. Bart Gordon		Cateo Typ									
Office Sought: X House Disburs Senate President State: TN District: 06	sement For: 2008 Primary X General Other (specify) ▼										
Full Name (Last, First, Middle Initial) Jeff Merkley for Senate						action II f Disbur			AC70B	57FF	48F/
Mailing Address 888 16th St NW Ste 570A				0 ^N	8	M / D	15	/ Y	ź o	08 [°]	
City Washington	StateZip CodeDC20006-4112			An	nour	nt of Eac	h Di	sburse		-	iod
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Candidate Name Rep. Jeff Merkley		Cateo Typ									
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SUBTOTAL of Disbursements This Page (optional)		Þ						3000	.00	
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Candidate Name Rep. Stephanie					(Cate Ty	gory/ pe										
Office Sought: State: SD	X House Senate President District: 01		ent For: Primary Other (spe	2008 X Gener ecify) ▼	al												
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Candidate Name Ashwin Madia		i			(Cate Ty	gory/ ce	_									
Office Sought: State: MN	X House Senate President District: 03		ent For: Primary Other (spe	2008 Gener ecify) ▼	al												
Full Name (Last, F Christine Jennin	First, Middle Initial) ngs For Congres	I							Trans Date o		isburs	eme		053	BCF69	9B94	4C2
Mailing Address	PO Box 49136								0 ^M 8	М	/ D	15	/		200	8 ^Y	
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Candidate Name Christine Jennii			. –			Cate Ty	gory/ pe										
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EMIZED DIS	BURSEMEN	Detailed Summary Page				21b 27		· -	X 2	3 8b		24 28c	,	25 29		26	
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NAME OF COMMI	TTEE (In Full)																
American Nurse	s Association PA	C															
Full Name (Last, Fin Kurt Schrader fo	,								ransa Date of					310	4913	1DB4	4691
Mailing Address	307 N Main St S	Ste 240							^м 8 ^м	/	^D 1	^D 5	/	Y	ź o č	8	
City Oregon City			State OR	Zip Code 97045					Amoun	t of E	ach	Dis	burs	em	ent thi	s Per	od
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Candidate Name Sen. Kurt Schrad	der					atego Type											
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Candidate Name Michael A. Arcur	i					atego Type	-										
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Full Name (Last, Fin Allyson Schwartz	,	I							ransa Date of					A2	30FD	42E	44FI
Mailing Address	PO Box 2232								0 ^M 8 ^M	/	۵2	2 ¹	/	Υ	20	8 [°]	
City Jenkinstown			State PA	Zip Code 19046					Amoun	t of E	ach	Dis	burs	em	ent thi	s Per	od
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Candidate Name Rep. Allyson Y.	Schwartz					atego Type											
	X House Senate President District: 13	Disburse	ment For: Primary Other (spe	2008 X General ecify) ▼													
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CHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	-	PAGE 16/17
	Detailed Summary Page	27	28a 28b	28c 29 30b
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for commercial purposes, other than using the n	ame and address of any political co	ommittee to sol	icit contributions f	rom such committee
NAME OF COMMITTEE (In Full) American Nurses Association PAC				
American Nuises Association FAC				
Full Name (Last, First, Middle Initial) John D Dingell for Congress Committee			Date of Disburs	
Mailing Address 607 14th St NW Ste 800				15 [°] 2008 [°]
City Washington	StateZip CodeDC20005		Amount of Eacl	h Disbursement this Period
Purpose of Disbursement				1000.00
Candidate Name Rep. John D. Dingell	1	Category/ Type		
Office Sought: X House Disbu Senate President State: MI District: 15	Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Committee to Elect Gary Ackerman			Date of Disburs	
Mailing Address 100 Jericho Quadrang Ste 223	le			2 1 [°] 2 0 0 8 [°]
City Jericho	State Zip Code NY 11753-2702		Amount of Eacl	h Disbursement this Period
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Candidate Name Rep. Gary L. Ackerman	1	Category/ Type		
Office Sought: X House Disbu Senate President State: NY District: 05	Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Tim Johnson For South Dakota			Transaction ID Date of Disburs	D: B7042326F00324C259
Mailing Address PO Box 1859				2 1 [′] ^Y ^Y 2 0 0 8 ^Y
City Sioux Falls	State Zip Code SD 57101-1859		Amount of Eacl	h Disbursement this Period
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Candidate Name Sen. Tim Johnson		Category/ Type		
Office Sought: House Disbu X Senate President	rsement For: 2008 Primary X General Other (specify) ▼			
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FEC Schedule B (Form 3X) (Revised 02/2003)

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		NAME OF COMM American Nurs	AITTEE (In Full) ses Association PA	С																	
Α.		Full Name (Last, Friends of Tim Mailing Address	First, Middle Initial) Johnson PO Box 17097								Date	of D	ion ID isburs				=130		IC78DF		
		City Urbana Purpose of Disbu	rsement	-	State L	Zip Code 61803-709	7	U			Amou	unt o	f Each	n Dis	bursei		t this F 00.00		d		
		Candidate Name Rep. Timothy	V. Johnson					ateg Typ													
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