

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
American Income Life Political Action Committee

ADDRESS (number and street) 3700 S. Stonebridge Drive
 Check if different than previously reported. (ACC)
McKinney TX 75070

2. **FEC IDENTIFICATION NUMBER** C00436899
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 10 01 2009 through 10 31 2009

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

Type or Print Name of Treasurer Mr. Jeremy Parten

Signature of Treasurer Electronically Filed by Mr. Jeremy Parten Date 11 12 2009

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Income Life Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		21862.89
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	28327.76									
(c) Total Receipts (from Line 19)	2139.21	22049.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30466.97	43911.97								
7. Total Disbursements (from Line 31)	1000.00	14445.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	29466.97	29466.97								
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
American Income Life Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2060.88	18135.94
(ii) Unitemized	78.33	3913.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2139.21	22049.08
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2139.21	22049.08
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))	2139.21	22049.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2139.21	22049.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	14445.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1000.00	14445.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	14445.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	2139.21	22049.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2139.21	22049.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<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)
American Income Life Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Linda Alleman		Date of Receipt MM / DD / YYYY 10 / 24 / 2009		
	Mailing Address 318 S Rita		Transaction ID: SA11AI.4801		
	City Waco	State TX	Zip Code 76705	Amount of Each Receipt this Period 26.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Asst. Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 264.80			

B.	Full Name (Last, First, Middle Initial) Mr. Domenico Bertini		Date of Receipt MM / DD / YYYY 10 / 24 / 2009		
	Mailing Address 3194 Darlington Dr		Transaction ID: SA11AI.4802		
	City Oaks	State CA	Zip Code 91360	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Director of Agent Retention			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Mr. Denise Bowyer		Date of Receipt MM / DD / YYYY 10 / 24 / 2009		
	Mailing Address 1840 Columbia Rd. NW #501		Transaction ID: SA11AI.4803		
	City Washington	State DC	Zip Code 20009	Amount of Each Receipt this Period 140.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Income Life	Occupation Vice President Public Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1404.80			

SUBTOTAL of Receipts This Page (optional)	216.96
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 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Diana Crosby	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 9
	Mailing Address 729 Ceder Rock PKWY	Transaction ID: SA11AI.4804
	City State Zip Code Waco TX 76712	Amount of Each Receipt this Period 101.34
	FEC ID number of contributing federal political committee. C	
Name of Employer American Income Life	Occupation Sr. Vice President AA Adm & Lead Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1013.40	

B.	Full Name (Last, First, Middle Initial) Mr. David Despot	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 9
	Mailing Address 5723 Sterling Lakes Cir. #206	Transaction ID: SA11AI.4806
	City State Zip Code Mason OH 45040	Amount of Each Receipt this Period 83.34
	FEC ID number of contributing federal political committee. C	
Name of Employer American Income Life	Occupation Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.40	

C.	Full Name (Last, First, Middle Initial) Mr. Robert Falvo	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 9
	Mailing Address 1705 Surrey LN	Transaction ID: SA11AI.4807
	City State Zip Code McKinney TX 75070	Amount of Each Receipt this Period 160.34
	FEC ID number of contributing federal political committee. C	
Name of Employer American Income Life	Occupation Sr. Vice President Field Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1603.40	

SUBTOTAL of Receipts This Page (optional)	345.02
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 8 / 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Debra Gamble

Mailing Address 708 Wheatland

City State Zip Code
McGregor TX 76657

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

Name of Employer American Income Life Occupation Senior VP- Agency

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 983.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4808

Amount of Each Receipt this Period
98.34

B.

Full Name (Last, First, Middle Initial)
James Gentile, Jr.

Mailing Address 5600 Leven Ln

City State Zip Code
McKinney TX 75070

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

Name of Employer American Income Life Occupation Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 568.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4809

Amount of Each Receipt this Period
87.50

C.

Full Name (Last, First, Middle Initial)
Murray Horowitz

Mailing Address 1400 Richards Cir

City State Zip Code
Alpharetta GA 30009

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

Name of Employer American Income Life Occupation Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4810

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **225.84**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Pamela Miller

Mailing Address 3705 Castle Ave.

City State Zip Code
Waco TX 76710

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

Name of Employer American Income Life Occupation Vice President Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.4812

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Randall Mull

Mailing Address 5416 Edinburgh

City State Zip Code
Waco TX 76710

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

Name of Employer American Income Life Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1408.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4813

Amount of Each Receipt this Period
140.84

C.

Full Name (Last, First, Middle Initial)
Ms Jules Pagano

Mailing Address 401 King Farm Blvd #302

City State Zip Code
Rockville MD 20850

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

Name of Employer American Income Life Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4815

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **390.84**

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

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

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

FOR LINE NUMBER: PAGE 10 / 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms Shashi Parekh

Mailing Address 213 Stockmoore Rd

City State Zip Code
Columbia SC 29212

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

Name of Employer American Income Life Occupation Director of Market Expansion

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4816

Amount of Each Receipt this Period
76.58

B. Full Name (Last, First, Middle Initial)
Mr. Gregory Sinner

Mailing Address 11641 Frontier Dr.

City State Zip Code
Frisco TX 75034

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

Name of Employer American Income Life Occupation 75034

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 708.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4818

Amount of Each Receipt this Period
70.84

C. Full Name (Last, First, Middle Initial)
Mr. Roger Smith

Mailing Address 131 Danbury Ct.

City State Zip Code
Lucas TX 75002-8475

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

Name of Employer American Income Life Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4348.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4820

Amount of Each Receipt this Period
434.80

SUBTOTAL of Receipts This Page (optional) ► **582.22**

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

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

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

FOR LINE NUMBER: PAGE 11 / 12

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Scott Smith

Mailing Address 1821 Woodbridge Dr.

City State Zip Code
McKinney TX 75070

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

Name of Employer Occupation
American Income Life Executive Vice President & CMO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4819

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
Larry Strong

Mailing Address 2222 Hwy 66 #5

City State Zip Code
Estates Park CO 80517

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

Name of Employer Occupation
American Income Life Insurance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4822

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

2060.88

**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 12 / 12

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

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A.

Full Name (Last, First, Middle Initial)
New Yorkers for Thompson

Mailing Address 120 Broadway Ste 3300

City State Zip Code
New York NY 10271

Purpose of Disbursement
2009 contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.4799

Date of Disbursement

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)