

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
National Action Committee (NACPAC)

ADDRESS (number and street) 3389 Sheridan St.
#424
 Check if different than previously reported. (ACC)
Hollywood FL 33021

2. **FEC IDENTIFICATION NUMBER** C00147983
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 11 25 2008 through 12 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 Mark Vogel

Signature of Treasurer Electronically Filed by Mark Vogel Date 01 18 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
National Action Committee (NACPAC)

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

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		15616.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	747.00									
(c) Total Receipts (from Line 19)	10936.00	183855.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11683.00	199471.00								
7. Total Disbursements (from Line 31)	8626.00	196414.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3057.00	3057.00								
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
National Action Committee (NACPAC)

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

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	10050.00	165220.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	877.00	11888.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10927.00	177108.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	6500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10927.00	183608.00
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.)	9.00	247.00
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))	10936.00	183855.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10936.00	183855.00

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.....	3626.00	38164.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3626.00	38164.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	5000.00	158250.00
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))..	8626.00	196414.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8626.00	196414.00

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	10927.00	183608.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10927.00	183608.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3626.00	38164.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3626.00	38164.00

**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 / 13
	<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)
National Action Committee (NACPAC)

A.	Full Name (Last, First, Middle Initial) Paul Cummings	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 1428 Brickell Ave., #400	Transaction ID: SA11AI.7366
	City State Zip Code Miami FL 33131	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Dues
	Name of Employer Self Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mary Gut	Date of Receipt MM / DD / YYYY 11 / 28 / 2008
	Mailing Address 7700 Kencot Ct..	Transaction ID: SA11AI.7335
	City State Zip Code Raleigh NC 27615	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Dues
	Name of Employer Ideal Fastener Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Michael Levin	Date of Receipt MM / DD / YYYY 12 / 08 / 2008
	Mailing Address 2105 West County Line Rd.	Transaction ID: SA11AI.7347
	City State Zip Code Jackson NJ 08527	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Dues
	Name of Employer Levin, Shea, Pfeiffer & Topas Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	3250.00
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 / 13
(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)
National Action Committee (NACPAC)

A.

Full Name (Last, First, Middle Initial)
Jack Levine

Mailing Address 4390 Pine Tree Drive

City State Zip Code
Miami Beach FL 33140

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation C.P.A.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11AI.7342

Amount of Each Receipt this Period 1000.00

Dues

B.

Full Name (Last, First, Middle Initial)
Lt. Gov. Richard Licht

Mailing Address 10 Weybosset St.

City State Zip Code
Providence RI 02903

FEC ID number of contributing federal political committee. C

Name of Employer Tillinghast, Licht, Perkins Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
12 / 24 / 2008

Transaction ID: SA11AI.7354

Amount of Each Receipt this Period 250.00

Dues

C.

Full Name (Last, First, Middle Initial)
Robert Neidorff

Mailing Address 3402 Ft. Roberdeau Ave.

City State Zip Code
Altoona PA 16602

FEC ID number of contributing federal political committee. C

Name of Employer UBS Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
11 / 28 / 2008

Transaction ID: SA11AI.7334

Amount of Each Receipt this Period 500.00

Dues

SUBTOTAL of Receipts This Page (optional) 1750.00

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 8 / 13
(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)
National Action Committee (NACPAC)

A.

Full Name (Last, First, Middle Initial) Stanley Newmark		Date of Receipt MM / DD / YYYY 12 / 22 / 2008
Mailing Address 9400 So. Dadeland Blvd., #300		Transaction ID: SA11AI.7356
City Miami	State FL	Zip Code 33156
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Attorney	Dues
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Steven Peretz		Date of Receipt MM / DD / YYYY 12 / 03 / 2008
Mailing Address 5654 Oakmont Ave.		Transaction ID: SA11AI.7344
City Ft. Lauderdale	State FL	Zip Code 33312
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Kluger Peretz Kaplin Berlin	Occupation Attorney	Dues
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) Joel Reinstein		Date of Receipt MM / DD / YYYY 12 / 22 / 2008
Mailing Address 925 So. Federal Hwy., #325		Transaction ID: SA11AI.7351
City Boca Raton	State FL	Zip Code 33432
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Joel Reinstein, P.A.	Occupation Attorney	Dues
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
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 / 13
(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)
National Action Committee (NACPAC)

A.

Full Name (Last, First, Middle Initial)
Harold Schnitzer

Mailing Address P.O. Box 2708

City State Zip Code
Portland OR 97208

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

Name of Employer Occupation
Harsch Investments President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2008

Transaction ID: SA11AI.7364

Amount of Each Receipt this Period
500.00

Dues

B.

Full Name (Last, First, Middle Initial)
Jonathan Slade

Mailing Address 1730 Rhode Island Avenue, Suite 317

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
The Cormac Group Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3125.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2008

Transaction ID: SA11AI.7350

Amount of Each Receipt this Period
1000.00

Dues

C.

Full Name (Last, First, Middle Initial)
Harry Smith

Mailing Address 701 Brickell Ave., 19th Floor

City State Zip Code
Miami FL 33131

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

Name of Employer Occupation
Ruden McCloskey Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2008

Transaction ID: SA11AI.7348

Amount of Each Receipt this Period
250.00

Dues

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 / 13
(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)
National Action Committee (NACPAC)

A.

Full Name (Last, First, Middle Initial)
Lawrence Smith

Mailing Address 3511 No 52 Avenue

City State Zip Code
Hollywood FL 33021

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.7343

Amount of Each Receipt this Period
600.00

Dues

B.

Full Name (Last, First, Middle Initial)
Ruth Stuzin

Mailing Address c/o Charles B. Stuzin
800 Douglas Rd., #500

City State Zip Code
Coral Gables FL 33134

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.7353

Amount of Each Receipt this Period
1000.00

Dues

C.

Full Name (Last, First, Middle Initial)
Mark Vogel

Mailing Address 3389 Sheridan St., #424

City State Zip Code
Hollywood FL 33021

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

Name of Employer Mark R. Vogel, P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2110.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.7349

Amount of Each Receipt this Period
200.00

Dues

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	10050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 13
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Action Committee (NACPAC)

A.

Full Name (Last, First, Middle Initial)
Interest

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA17.7372

Amount of Each Receipt this Period
9.00

Interest

SUBTOTAL of Receipts This Page (optional)	▶	9.00
TOTAL This Period (last page this line number only)	▶	9.00

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 12 / 13

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

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NAME OF COMMITTEE (In Full)
National Action Committee (NACPAC)

A.	Full Name (Last, First, Middle Initial) Mark R. Vogel, P.A.			Transaction ID: SB21B.7346	
	Mailing Address 3389 Sheridan St., #424			Date of Disbursement 11 / 30 / 2008	
	City Hollywood	State FL	Zip Code 33021	Amount of Each Disbursement this Period 3500.00	
	Purpose of Disbursement Offices, secr'l, xerox, long distance			Category/ Type	
	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)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	3500.00

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

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NAME OF COMMITTEE (In Full)
National Action Committee (NACPAC)

<p>A. Full Name (Last, First, Middle Initial) Kagen 4 Congress</p> <p>Mailing Address PO Box 965</p> <p>City Appleton State WI Zip Code 54912</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7352 Date of Disbursement 12 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Langevin for Congress</p> <p>Mailing Address 181-A Knight St.</p> <p>City Warwick State RI Zip Code 02886</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7345 Date of Disbursement 12 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 3500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Minnick for Congress</p> <p>Mailing Address 8150 W. Emerald, Suite #170</p> <p>City Boise State ID Zip Code 83704</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7357 Date of Disbursement 12 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

5000.00