

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
 For Other Than An Authorized Committee

RECEIVED
 FEC MAIL CENTER
 2008 MAR -6 PM 1:20
 Office Use Only

1. NAME OF COMMITTEE (in full) **SIK PAC** TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

ADDRESS (number and street) **PO BOX 286**
 Check if different than previously reported. (ACC) **CALDWELL NJ 07006**

2. FEC IDENTIFICATION NUMBER ▼ **C00432765** CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR **X** 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) **X** Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

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 2007** through **10 31 2007**

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 **Lisa Martinez**
 Signature of Treasurer **L Martinez** Date **03 03 2008**

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

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

28039651957

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Silk PAC

Report Covering the Period: From: **10 01 2007** To: **10 30 2007**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2007		00
(b) Cash on Hand at Beginning of Reporting Period.....	12,513.90	
(c) Total Receipts (from Line 19)	10,650.00	37,150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	23,163.90	37,150.00
7. Total Disbursements (from Line 31).....	7,500.00	21,486.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	15,663.90	15,663.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

28039651958

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Siek PAC

Report Covering the Period: From:

To:

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).....	10,650.00	14,150.00
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10,650.00	14,150.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		23,000.00
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	10,650.00	37,150.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	10,650.00	37,150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10,650.00	37,150.00

28039651959

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		1,186. ¹⁰
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		1,186. ¹⁰
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	<u>00</u>	12,800. ⁰⁰
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements (non-fed).....	7,500. ⁰⁰	7,500. ⁰⁰
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7,500. ⁰⁰	21,486. ¹⁰
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7,500. ⁰⁰	21,486. ¹⁰

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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)	10,650. ⁰⁰	37,150. ⁰⁰
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10,650. ⁰⁰	37,150. ⁰⁰
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		1,186. ¹⁰
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		35,963. ⁹⁰

28039651961

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

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)
Silk PAC

A. Full Name (Last, First, Middle Initial) <u>MAGLIOCCHETTI, mark</u>		Date of Receipt <u>10 11 2007</u>
Mailing Address <u>10203 Woodvale Pond Dr</u>		Amount of Each Receipt this Period <u>2,500.00</u>
City, State, Zip Code <u>Fairfax Station VA 22039</u>		
FEC ID number of contributing federal political committee. <u>C</u>		Aggregate Year-to-Date ▼ <u>3,500.00</u>
Name of Employer <u>PMA GROUP</u>	Occupation <u>Lobbyist</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) <u>MAGLIOCCHETTI, Leslie</u>		Date of Receipt <u>10 11 2007</u>
Mailing Address <u>10203 Woodvale Pond Dr</u>		Amount of Each Receipt this Period <u>1,500.00</u>
City, State, Zip Code <u>Fairfax Station VA 22039</u>		
FEC ID number of contributing federal political committee. <u>C</u>		Aggregate Year-to-Date ▼ <u>1,500.00</u>
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) <u>Gardina, Julie</u>		Date of Receipt <u>10 11 2007</u>
Mailing Address <u>1142 N. Randolph St.</u>		Amount of Each Receipt this Period <u>1,650.00</u>
City, State, Zip Code <u>Arlington VA 22201</u>		
FEC ID number of contributing federal political committee. <u>C</u>		Aggregate Year-to-Date ▼ <u>1,650.00</u>
Name of Employer <u>PMA GROUP</u>	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<u>5,650.00</u>
TOTAL This Period (last page this line number only).....	<u>10,650.00</u>

28039651962

**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	OF
	<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)
Silk PAC

A. Full Name (Last, First, Middle Initial) Roberts Elizabeth A		Date of Receipt 10 22 2007
Mailing Address 211 11th St. SE		Amount of Each Receipt this Period 2,500.00
City Washington	State Zip Code DC 20003	
FEC ID number of contributing federal political committee. C		
Name of Employer The DMA Group	Occupation Lobbyist	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

B. Full Name (Last, First, Middle Initial) De Rosa, Rebecca Kingery		Date of Receipt 10 22 2007
Mailing Address 1101 S. Arlington Ridge Rd #6116		Amount of Each Receipt this Period 2,500.00
City Arlington	State Zip Code VA 22202	
FEC ID number of contributing federal political committee. C		
Name of Employer The DMA Group	Occupation Consultant	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....▶	5,000.00
TOTAL This Period (last page this line number only).....▶	10,650.00

28039651962

**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	OF
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" 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)
SIK PAC

Full Name (Last, First, Middle Initial) A. Fattah for Mayor		Date of Disbursement 10 16 2007
Mailing Address 3900 Ford Rd Ste B-D		
City Philadelphia	State PA	Zip Code 19131
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name Chaka Fattah		
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 checked="" type="checkbox"/> Other (specify) Local Govt.	
State:	District:	

Full Name (Last, First, Middle Initial) B. Jasey for Assembly		Date of Disbursement 10 24 2007
Mailing Address PO Box 1006		
City South Orange	State NJ	Zip Code 07079
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name Mula Jasey		
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 checked="" type="checkbox"/> Other (specify) State Govt.	
State:	District:	

Full Name (Last, First, Middle Initial) C. Caputo for Assembly		Date of Disbursement 10 24 2007
Mailing Address 47 Passaic Ave		
City Bellville	State NJ	Zip Code 07109
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1,000.00
Candidate Name Ralph Caputo		
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 checked="" type="checkbox"/> Other (specify) Local Govt.	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2,000.00
TOTAL This Period (last page this line number only).....	7,500.00

28039651964

**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 OF

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

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NAME OF COMMITTEE (In Full)
Silk PAC

A. Full Name (Last, First, Middle Initial) Giblin for Assembly		Date of Disbursement 10 24 2007
Mailing Address PO Box 43062		Amount of Each Disbursement this Period 1,000.00
City Montclair	State NJ	
Zip Code 07043		
Purpose of Disbursement Contribution		
Candidate Name Tom Giblin		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 checked="" type="checkbox"/> Other (specify) State Govt.	
State: District:		

B. Full Name (Last, First, Middle Initial) Girgenti for Senate		Date of Disbursement 10 24 2007
Mailing Address 507 Lafayette Ave		Amount of Each Disbursement this Period 500.00
City Hawthorne	State NJ	
Zip Code 07506		
Purpose of Disbursement Contribution		
Candidate Name John Girgenti		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 checked="" type="checkbox"/> Other (specify) State Govt.	
State: District:		

C. Full Name (Last, First, Middle Initial) Comm. to Elect Evans NJ Assemb.		Date of Disbursement 10 24 2007
Mailing Address PO Box 1181		Amount of Each Disbursement this Period 500.00
City Paterson	State NJ	
Zip Code 07509		
Purpose of Disbursement Contribution		
Candidate Name Ellen Evans		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 checked="" type="checkbox"/> Other (specify) State Govt.	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2,000.00
TOTAL This Period (last page this line number only).....	7,500.00

28039651965

**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 OF

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

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NAME OF COMMITTEE (In Full)
Silk PAC

Full Name (Last, First, Middle Initial) <i>Pou for Assembly</i>		Date of Disbursement <i>10 24 2007</i>
Mailing Address <i>PO Box 2696</i>		Amount of Each Disbursement this Period <i>500.00</i>
City <i>Paterson</i>	State <i>NJ</i>	
Purpose of Disbursement <i>Contribution</i>	Zip Code <i>07509</i>	
Candidate Name <i>Nellie Pou</i>	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 checked="" type="checkbox"/> Other (specify) <i>State Govt.</i>	
State: District:		

Full Name (Last, First, Middle Initial) <i>Scalera for Assembly</i>		Date of Disbursement <i>10 21 2007</i>
Mailing Address <i>47 Washington Ave.</i>		Amount of Each Disbursement this Period <i>500.00</i>
City <i>Dutley</i>	State <i>NJ</i>	
Purpose of Disbursement <i>Contribution</i>	Zip Code <i>07110</i>	
Candidate Name <i>FRED Scalera</i>	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 checked="" type="checkbox"/> Other (specify) <i>State Govt.</i>	
State: District:		

Full Name (Last, First, Middle Initial) <i>Schaer for Assembly</i>		Date of Disbursement <i>10 24 2007</i>
Mailing Address <i>47 Washington Ave</i>		Amount of Each Disbursement this Period <i>500.00</i>
City <i>Dutley</i>	State <i>NJ</i>	
Purpose of Disbursement <i>Contribution</i>	Zip Code <i>07110</i>	
Candidate Name <i>Gary Schaer</i>	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 checked="" type="checkbox"/> Other (specify) <i>State Govt</i>	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<i>1,500.00</i>
TOTAL This Period (last page this line number only).....	<i>7,500.00</i>

99615965082

**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 OF

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

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NAME OF COMMITTEE (In Full)
Silk PAC

A. Full Name (Last, First, Middle Initial) Friends of Pat Lepore		Date of Disbursement 10 24 2007
Mailing Address 19 Mckeown Ave		Amount of Each Disbursement this Period 1,000.⁰⁰
City West Paterson NJ	State NJ	
Zip Code 07424		
Purpose of Disbursement Contribution		
Candidate Name PAT LEPORE		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 checked="" type="checkbox"/> Other (specify) COUNTY GOVT.	
State: District:		

B. Full Name (Last, First, Middle Initial) Friends of Terry Duffy		Date of Disbursement 10 24 2007
Mailing Address 99 Central Avenue		Amount of Each Disbursement this Period 1,000.⁰⁰
City North Haledon NJ	State NJ	
Zip Code 07508		
Purpose of Disbursement Contribution		
Candidate Name TERRY DUFFY		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 checked="" type="checkbox"/> Other (specify) COUNTY GOVT.	
State: District:		

C. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		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)..... **2,000.⁰⁰**

TOTAL This Period (last page this line number only)..... **7,500.⁰⁰**

28039651967

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.

28039651968

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<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 checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>3/4/08</i>
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] *3/6/08*
 PREPARER DATE PREPARED