FEC FORM 3X	A	EPORT O ND DISBU Other Than Ar	IRSEME	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		E FEC MAILING LA TYPE OR PRINT		nple:If typing the lines	, type			
		C						
ADDRESS (number and	street)	3515 Georgia Avenu	e 					
Check if differ than previously reported. (ACC	ent L	Silver Spring					20910	<b>3492</b>
2. FEC IDENTIFICAT		R ♥ _	CITY 🛋		S		ZIPCC	DE 🔺
C00017525			3. IS THIS REPORT		NEW N) <b>OR</b>	X AI (A	MENDED	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Only	orts: Report(Q1) Report(Q2) I5 Report(Q3) B1 Report(YE) lid-Year on-election	(b) Monthly Report Due On: X (c) 12-Day <b>PRE</b> -Elect Report for (d) 30-Day <b>Post</b> -Elec Report for	the:	Ë.	12C)	Sep	12G) in the State	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer	•	Mary Behrens	my knowledge a	through nd belief it is		2 8 and complete. ate 0 5	2007	2008
NOTE : Submission of f	alse, erroneous	s, or incomplete info	rmation may sub	pject the perso	on signing this	Report to the	FEC FOF	
Use Only							(Rev. 12/20	

Image# 28	3931513966
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### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2 Write or Type Committee Name American Nurses Association PAC DD MM DD YW м м Y 02 02 28 01 2007 2007 Report Covering the Period: From: To: **COLUMN A** COLUMN B **This Period** Calendar Year-to-Date (a) Cash on Hand 6. 2007 81815.99 January 1 (b) Cash on Hand at 18004.57 Begining of Reporting Period ..... 45117.68 58082.91 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 63122.25 139898.90 6(a) and 6(c) for Column B) ..... 11138.19 87914.84 7. Total Disbursements (from Line 31) ..... Cash on Hand at Close of 8. **Reporting Period** 51984.06 51984.06 (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 BΥ the committee (Itemize all on 0.00 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

FE6AN026

Image# 28931513967		DETAILED SUMMARY PAGE OF RECEIPTS	
	FEC Form 3X (Rev. 06/2004)		Page 3
V	Vrite or Type Committee Name American Nurses Association PAC		
F	Report Covering the Period: From:	0 2 0 1 2 0 0 7 To	: 02 D D Y Y Y Y 28 2007
	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)	4560.00	5510.00
	(ii) Unitemized	40497.13	52380.87
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	45057.12	57890.87
	(b) Political Party Committees	0.00	0.00
	<ul> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> <li>(d) Total Contributions (add Lines</li> </ul>	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	▶ 45057.13	57890.87
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.)	60.55	192.04
18.		nds	
	(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))	45117.68	58082.91
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	45117.68	58082.91

Image# 28931513968

## **DETAILED SUMMARY PAGE**

II. DISBURSEMENTS	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
1. 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	1638.19	2414.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) <b>&gt;</b>	1638.19	2414.84
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
3. Contributions to Federal Candidates/Committees and Other Political Committees	9500.00	85500.00
4. Independent Expenditure (use Schedule E)	0.00	0.00
5. 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
8. 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
<ul> <li>(d) Total Contribution Refunds</li> <li>(add Lines 28(a), (b), and (c))</li> </ul>	0.00	0.00
9. Other Disbursements	0.00	0.00
<ul> <li>0. Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity</li> <li>(from Schedule H6)</li> </ul>		
(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))	11138.19	87914.84
<ol> <li>Total Federal Disbursements</li> <li>(subtract Line 21(a)(ii) and Line 30(a)(ii)</li> </ol>		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	11138.19	87914.84

### Image# 28931513969

# DETAILED SUMMARY PAGE

	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)	45057.13	57890.87
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	45057.13	57890.87
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1638.19	2414.84
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1638.19	2414.84

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 6 / 13         (check only one)       11a         X       11a         13       14         15       16         17		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Nurses Association PAC	on for the purpose of soliciting contributions			
A.	Full Name (Last, First, Middle Initial)         Ms. Frances M. Edwards         Mailing Address       50 Concord Park E.	Date of Receipt			
	City	State Zip Code	Transaction ID: AA79698F709734273B2F		
	Nashville	TN 37205-4705	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	500.00		
	Name of Employer self	Occupation Clinical Specialist			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 500.00			
— В.	Full Name (Last, First, Middle Initial) Ms. Mary L. Murphy		Date of Receipt		
	Mailing Address 26 Jill Ave		0 2 1 3 2 0 0 7		
	City	State Zip Code	Transaction ID: A416BD9E4702B43F6BC		
	Marmora	NJ 08223-1152	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	290.00		
	Name of Employer Atlantic Care Regional Me- dical Center	Occupation Registered Nurse			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  290.00			
– c.	Full Name (Last, First, Middle Initial) Ms. Mary L. Behrens		Date of Receipt		
	Mailing Address 5504 E. 22nd St		M         M         /         D         D         /         Y		
	City	State Zip Code	Transaction ID: A5E81F14FB088447A9B		
	Casper	WY 82609	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	2500.00		
	Name of Employer Dr Hugh Depodo, MD	Occupation Family Nurse Practitioner			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00			
Γ	SUBTOTAL of Receipts This Page (optional)		3290.00		

ç	SCHEDULE A (FEC Form 3X	)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 13
	•	,	for each category of the	(check only one)
. 1	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_			, 3	13 14 15 16 17
	Any information copied from such Reports and	d Statements ma	y not be sold or used by any pers	on for the purpose of soliciting contributions
	or for commercial purposes, other than using	the name and ad	dress of any political committee t	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Nurses Association PAC			
∠ A.	Full Name (Last, First, Middle Initial) Ms. Rebecca M. Patton	Date of Receipt		
	Mailing Address 2027 Lincoln Ave			$\begin{array}{c c} \hline \\ \hline $
	City	State	Zip Code	Transaction ID: A0F018290A91D4D69AF
	Lakewood	ОН	44107	Amount of Each Receipt this Period
	FEC ID number of contributing		0 0 0 0 0	
	federal political committee.	C		320.00
	Name of Employer American Nurses Associati-	Occupatio		-
	on	Presiden		
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify)		320.00	
		0.0	0 0 0 0 0 0 0 0	-
3.	Full Name (Last, First, Middle Initial) Ms. Brenda M. Roberts			Date of Receipt
•	Mailing Address 10 Eucalyptus Rd			
	To Eddalyptus nu			02 17 2007
	City	State	Zip Code	Transaction ID: ADDBB4DF2135C4610B
	Belvedere	CA	94920-2436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		-100.00
				stopped payment on her do-
	Name of Employer University of California	Occupatio RN	n	natio
	Receipt For:	I	Verste Dete 🛡	
	Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		0.00	
_		0.0		
	Full Name (Last, First, Middle Initial) Ms. Jean A. Ansley			Date of Receipt
	Mailing Address 849 Kingswood Dr			0 2 2 0 2 0 0 7
	City	State	Zip Code	Transaction ID: AF10FDF7657114B5390
	Lima	OH	45804	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer Lima Memorial Hospital	Occupatio	n	7
		Nurse		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Cther (specify) ▼		250.00	
		0 0		-
Γ	SUBTOTAL of Receipts This Page (astional	· ·		470.00
┝	SUBTOTAL of Receipts This Page (optional	,		
	TOTAL This Period (last page this line numb	er only)		•

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 8 / 13         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Nurses Association PAC	I Statements may not be sold or used by any personant he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial)         Ms. Bonnie Ann Mitchell Kautz         Mailing Address       309 S. 3rd St         City         Apollo         FEC ID number of contributing federal political committee.         Name of Employer Kiski Area School District         Receipt For:         Primary       General Other (specify) ▼	State     Zip Code       PA     15613-1131       C     Occupation       Nurse     Aggregate Year-to-Date       Aggregate Year-to-Date     ▼	Date of Receipt 0 2 2 2 2 2 0 0 7 Transaction ID: A75B68F49B5D642A9A79 Amount of Each Receipt this Period 100.00
В.	Full Name (Last, First, Middle Initial)         Kathleen A Ennen         Mailing Address       6169 River Sound Ci         City         Southport         FEC ID number of contributing federal political committee.         Name of Employer Self-employed         Receipt For:         Primary       General         Other (specify) ♥	ircle          State       Zip Code         NC       28461         C       Occupation         RN       Aggregate Year-to-Date         Aggregate Year-to-Date       500.00	Date of Receipt 0 2 0 7 Transaction ID: A6BDD3C5A93404D5298 Amount of Each Receipt this Period 250.00
- C.	Full Name (Last, First, Middle Initial)         Ms. Cynthia A. Braseth         Mailing Address       106 Reeves Ct         City         Grand Forks         FEC ID number of contributing federal political committee.         Name of Employer United Hosptl         Receipt For:         Primary       General         Other (specify) ▼	State     Zip Code       ND     58201-912       C       Occupation       Executive Leader       Aggregate Year-to-Date       400.00	Date of Receipt
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb	-	550.00

	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)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si 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) Ms. Sara McCumber			Date of Receipt
	Mailing Address 2004 Lackawanna Ave			M M / D D / Y Y Y Y 02 28 2007
	City	State	Zip Code	Transaction ID: A795F01A60AEC4601B10
	Superior	WI	54880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Duluth Clinic	Occupatio Nurse Pr	n actitioner	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	►	250.00
TOTAL This Period (last page this line number only)	►	4560.00

	CHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	NUMBER:     PAGE     10 / 13       y one)     22     23     24     25     26       28a     28b     28c     29     30b
	ny Information copied from such Reports and State r for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) American Nurses Association PAC			
∠ A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 27025			Transaction ID: BE8A3EEB5442F43C786I Date of Disbursement
	City Richmond Purpose of Disbursement bank fees Candidate Name Office Sought: House Disburs Senate President	State Zip Code VA 23261	Category/ Type	Amount of Each Disbursement this Period 426.11
В.	State:       District:         Full Name (Last, First, Middle Initial)         Sun Trust Bank         Mailing Address       PO Box 622227			Transaction ID: B2A56C649D58F4D4FB2 Date of Disbursement
	City Orlando Purpose of Disbursement Bank fees Candidate Name Office Sought: House Disburs Senate President	State Zip Code FL 32862-2227	Category/ Type	Amount of Each Disbursement this Period

	SUBTOTAL of Disbursements This Page (optional)	•	1518.57
	TOTAL This Period (last page this line number only)	►	1518.57
i	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)

TEMIZED DISBURSEMENTS       for each category of the image of the image of the purpose of soliciting contributions from such Reports and Statements may note solid or used by any person of the purpose of soliciting contributions from such committee to solicit contribution for control contributions from such committee to solicit control control control control contrelation fore from such control control control control contrelat	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LIN heck or			R:			P	AG	iE 11,	/ 13	
for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee         NAME OF COMMITTEE (in Fuil)         American Nurses Association PAC         Full Name (Last, First, Middle Initial)         LATOURETTE FOR CONGRESS         Mailing Address 320 Kenarden Dr         City       State         Purpose of Disbursement         Candidate Name         Gandidate Name         State: OH         Distric: 14         Full Name (Last, First, Middle Initial)         John Spratt for Congress         Mailing Address         Mailing Address         President         Distric: 14         Full Name (Last, First, Middle Initial)         John Spratt for Congress         Mailing Address       PO Box 830         Category/ York       State         State: SC       Disbursement For:         Office Sought:       Answert SC         Mailing Address       PO Box 830         Category/ York       State         State: SC       Disbursement For:         Other (specify) ▼       Transaction ID: BA89302041AF74C         Category/ Rep. John M. Spratt, Jr.       Answert Base Address         Other (specify) ▼ <td< th=""><th>EMIZED DISBURSEMENTS</th><th></th><th></th><th>21b</th><th>Ĺ</th><th>22</th><th></th><th></th><th>F</th><th>1</th><th>F</th><th></th><th>F</th><th>26 30</th></td<>	EMIZED DISBURSEMENTS			21b	Ĺ	22			F	1	F		F	26 30
LATOURETTE FOR CONGRESS         Mailing Address       320 Kenarden Dr         City       State       Zip Code         Highland Heights       OH       44143         Purpose of Disbursement       Calegory/         City       Senate       Disbursement For:         President       Disbursement For:       2008         State: OH       District: 14       Transaction ID: BA89302041AF74C         Delto of Disbursement       Other (specify) ▼       Transaction ID: BA89302041AF74C         Date of Disbursement       Other (specify) ▼       Transaction ID: BA89302041AF74C         Date of Disbursement       Other (specify) ▼       Transaction ID: BA89302041AF74C         Date of Disbursement       Other (specify) ▼       Transaction ID: BA89302041AF74C         Date of Disbursement       Other (specify) ▼       Amount of Each Disbursement         Mailing Address       PO Box 830       Calegory/         City       State       Zip Code         Purpose of Disbursement       Disbursement For:       2008         Candidate Name       Disbursement For:       2008         President       Disbursement For:       2008         District: 10.5       Disbursement       Disbursement         Office Sought:       House<	for commercial purposes, other than using the name of NAME OF COMMITTEE (In Full)													J
LATOURETTE FOR CONGRESS       Date of Disbursement         Mailing Address       320 Kenarden Dr         City       State       Zip Code         Highland Heights       OH       44143         Purpose of Disbursement       Category/ Type       1000.00         Candidate Name Rep. Steven C. LaTourette       Disbursement For:       2008         Office Sought:       X House President       Disbursement For:       2008         Mailing Address       PO Box 830       Transaction ID: BA89302041AF74C Date of Disbursement         City       State       Zip Code         York       State       Zip Code         Purpose of Disbursement       Category/ Type       Y 2 0 0 7 Y         City       State       Zip Code         Vork       State       Zip Code         Contribution       Category/ Type       Y 2 0 0 7 Y         City       State       Zip Code         State:       Senate       Disbursement For:       2008         President       State       Zip Code       Amount of Each Disbursement         Collins for Senator       Disbursement For:       2008       Transaction ID: B9A8910AEB50542         Mailing Address       PO Box 1096       ME       Other (specify) ▼       <	Full Name (Last, First, Middle Initial)				Τ.	Trans		tion ID	. D.	74029	001			םפר
Mailing Address       320 Kenarden Dr       0 2       2 3       2 0 0 7         City       State       Zip Code       Amount of Each Disbursement this Peri         Purpose of Disbursement       Category/ Type       1000.00         Candidate Name Rep. Steven C. LaTourette       Disbursement For:       2008         Office Sought:       X       House President       Disbursement For:       2008         State: OH       District: 14       Disbursement For:       2008         Full Name (Last, First, Middle Initial)       Other (specify) ▼       Transaction ID: BA89302041AF74C         John Spratt for Congress       Amount of Each Disbursement this Peri         Wailing Address       PO Box 830       Amount of Each Disbursement this Peri         City       State       Zip Code         York       State       Zip Code         Office Sought:       X       President         Category/ Rep. John M. Spratt, Jr.       Disbursement For:       2008         City       State       Zip Code       Amount of Each Disbursement this Peri         Office Sought:       X       House       Disbursement For:       2008         State: SC       District: 05       Disbursement for:       2008       Amount of Each Disbursement this Peri						Date	of E	Disburs	eme	-				J2D.
Highland Heights       OH       44143         Purpose of Disbursement       Image: Category' Type         Office Sought:       X       House         State: OH       Disbursement For:       2008         X       Primary       General         Other (specify)       Image: Category' Type         Full Name (Last, First, Middle Initial)       Other (specify)         John Spratt for Congress       Image: Category' Type         Mailing Address       PO Box 830         City       State         York       SC         Senate       Sc 29745         Purpose of Disbursement Contribution       Category' Type         Office Sought:       X       House         Senate       Disbursement For:       2008         York       SC 29745       Amount of Each Disbursement this Peri Category' Type         Office Sought:       X       House       Disbursement For:       2008         Collins for Senator       X       Primary       General       Category' Type         Mailing Address       PO Box 1096       Mailing Address       PO Box 1096       Amount of Each Disbursement this Peri Disbursement For:         Category'       Transaction ID: B9A8310AEB50545       Date of Disbursement this Peri Disburse	Mailing Address 320 Kenarden Dr					0 2			2 3			200	7	
Candidate Name       Category/ Type       Category/ Type         Coffice Sought:       X       House       Disbursement For:       2008         Coffice Sought:       X       House       Disbursement For:       2008         State:       Other (specify)       State       Disbursement         Full Name (Last, First, Middle Initial)       Other (specify)       State       Zip Code         Mailing Address       PO Box 830       Category/ SC       29745       Amount of Each Disbursement this Peri         Contribution       Candidate Name       Scategory/ Type       Transaction ID: BA89302041AF74C         Office Sought:       X       Previsiont       Amount of Each Disbursement this Peri         Contribution       Category/ Type       19       Y       2007         Office Sought:       X       House       Disbursement For:       2008         Contribution       Category/ Type       Transaction ID: B9A8910AEB50548       Date of Disbursement         Collins for Senator       Mailing Address       PO Box 1096       Transaction ID: B9A8910AEB50548         City       State       Zip Code       Bangor       Amount of Each Disbursement this Peri         Mailing Address       PO Box 1096       Category/ Type       Y 2 0 0 7 Y	Highland Heights					Amou	Int	of Eacl	ו Dis	sburse			-	od
Rep. Steven C. LaTourette       Type         Office Sought:       X House Senate       Disbursement For:       2008         Yerimary       General       Other (specify) ▼         State: OH       District: 14       Disbursement For:       2008         Full Name (Last, First, Middle Initial) John Spratt for Congress       Other (specify) ▼       Transaction ID: BA89302041AF740         Mailing Address       PO Box 830       Amount of Each Disbursement       Disbursement this Peri (150, 00)         City       State       Zip Code       Amount of Each Disbursement this Peri (1500,00)         Category/ Type       Transaction ID: B9A8910AEB50545         Office Sought:       X House Senate       Disbursement For:       2008         Yerimary       General       Other (specify) ▼       Transaction ID: B9A8910AEB50545         City       State: SC       District: 05       Transaction ID: B9A8910AEB50545         Full Name (Last, First, Middle Initial)       Category/ Type       Disbursement       Disbursement         City       State       Zip Code       Amount of Each Disbursement this Peri Disbursement       Disbursement         City       State       Zip Code       Amount of Each Disbursement this Peri Disbursement       Disbursement this Peri Disbursement For:       2008         City <td>·</td> <td></td> <td></td> <td></td> <td></td> <td>L.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>1000.</td> <td>00</td> <td></td>	·					L.						1000.	00	
Senate       President         State: OH       District: 14         Full Name (Last, First, Middle Initial)       John Spratt for Congress         Mailing Address       PO Box 830         City       State: Zip Code         York       State: Zip Code         Purpose of Disbursement       Category/         Condicate Name       Disbursement For:       2008         York       State:       Zip Code         Office Sought:       X       House         State: SC       Disbursement For:       2008         Collins for Senator       X       Primary         Mailing Address       PO Box 1096       Transaction ID: B9A8910AEB50548         City       State       Zip Code         Mailing Address       PO Box 1096       Transaction ID: B9A8910AEB50548         Disbursement       Office Sought:       X         Mailing Address       PO Box 1096       Amount of Each Disbursement this Peri         Office Sought:       X       Neate       Zip Code         Mailing Address       PO Box 1096       Amount of Each Disbursement this Peri         Other (specify)       Transaction ID: B9A8910AEB50548       Disbursement this Peri         Office Sought:       Y and Y       Y and Y	Rep. Steven C. LaTourette													
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NAME OF COMMITTEE (In Full)				
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Full Name (Last, First, Middle Initial) Peter Stark Re-Election Committee			Transaction ID Date of Disburs	: B8F5FF9C6EAF246D5 ement
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Candidate Name Rep. Pete Stark		Category/ Type		
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