

**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 Campaign Fund

ADDRESS (number and street)

30011 Ivy Glenn Drive, Suite 223

☐Check if different
than previously
reported. (ACC)

Laguna Niguel

CA

92677

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00437822

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

2008

through

10

15

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

James Lacy

Signature of Treasurer

Electronically Filed by James Lacy

Date

10

29

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**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
National Campaign Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	5	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		0.00
(b) Cash on Hand at Beginning of Reporting Period	22050.62	
(c) Total Receipts (from Line 19)	158512.63	1476619.59
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	180563.25	1476619.59
7. Total Disbursements (from Line 31)	131045.02	1427001.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49518.23	49518.23
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)	1960.00	

☐ 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
National Campaign Fund

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	0

D	D
1	5

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	30353.50	568374.38
(i) Itemized (use Schedule A)	123159.13	903245.21
(ii) Unitemized	153512.63	1471619.59
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	153512.63	1471619.59
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	5000.00	5000.00
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))	158512.63	1476619.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	158512.63	1476619.59

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.....	32832.00	187713.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	32832.00	187713.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	98213.02	1234255.04
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	5000.00
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	33.25
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))..	131045.02	1427001.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131045.02	1427001.36

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)	153512.63	1471619.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	153512.63	1471619.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32832.00	187713.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32832.00	187713.07

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

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

FOR LINE NUMBER: PAGE 6 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City

CINCINNATI

State

OH

Zip Code

45215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Transaction ID: INC.A.12415

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Transaction ID: INC.A.12401

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

MS MARGARET B W SMITH

Mailing Address 11750 SEABECK HWY NW

City

SEABECK

State

WA

Zip Code

98380

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Transaction ID: INC.A.12499

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

550.00

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 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. NAVY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Transaction ID: INC.A.12396

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS CAROL BAKER

Mailing Address 30573 E SUNSET DR S

City

REDLANDS

State

CA

Zip Code

92373

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12479

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS CAROL BAKER

Mailing Address 30573 E SUNSET DR S

City

REDLANDS

State

CA

Zip Code

92373

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12480

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)

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

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

FOR LINE NUMBER: PAGE 8 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS CAROL BAKER

Mailing Address 30573 E SUNSET DR S

City

REDLANDS

State

CA

Zip Code

92373

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12478

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

William Childs

Mailing Address 3538 Eastwind St

City

Indianapolis

State

IN

Zip Code

46227

FEC ID number of contributing
federal political committee.

C

Name of Employer
none - Retired

Occupation
none - Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12685

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Samuel Coco

Mailing Address 30 Sawyer Road

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
None

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 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12527

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

260.00

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 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR SOLOMON COOK

Mailing Address 303 STATE ROUTE 37

City

HOGANSBURG

State

NY

Zip Code

13655

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12387

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Anne Erskine

Mailing Address 41 Sullivan Chase Drive

City

Avondale

State

PA

Zip Code

19311

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12544

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

COL NEAL G GRIMLAND, RET

Mailing Address 642 BABCOCK RD
COTTAGE 4D

City

SAN ANTONIO

State

TX

Zip Code

78201

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. GOVERNMENT

Occupation
RETIRED MILITARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12460

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Sue Hellebusch

Mailing Address 143 Country Ridge Lane

City

Washington

State

MO

Zip Code

63090

FEC ID number of contributing
federal political committee.

C

Name of Employer
homemaker

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12761

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Sue Hellebusch

Mailing Address 143 Country Ridge Lane

City

Washington

State

MO

Zip Code

63090

FEC ID number of contributing
federal political committee.

C

Name of Employer
homemaker

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12760

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS MELBA HELSUMS

Mailing Address HC 82 BOX 270

City

OXFORD

State

AR

Zip Code

72565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12448

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 11 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR EUGENE J IDONE

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12385

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

George Krauss

Mailing Address 152 Longhorn Lane

City

Cheraw

State

SC

Zip Code

29520

FEC ID number of contributing
federal political committee.

C

Name of Employer
100% disabled Veteran

Occupation
N/N

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12567

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES W LIEBERT

Mailing Address 2302 E HAMPTON ST

City

TUCSON

State

AZ

Zip Code

85719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12465

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

325.00

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 12 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Cecil Meadows

Mailing Address 930 Koa St

City

Honolulu

State

Hi

Zip Code

96816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Volunteer

Occupation

USN Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12581

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Edw. P. Passailaigue

Mailing Address 5685 Rolling Acres Lane

City

Cumming

State

GA

Zip Code

30028

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation

RET.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12603

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12432

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

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 13 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Larry Rigdon

Mailing Address 914 Main Street Suite 1805

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
DIRECTOR

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12615

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12402

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

MS JANET E SCHRODER

Mailing Address 75450 ROAD 330

City

GRANT

State

NE

Zip Code

69140

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12443

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

475.00

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 14 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Vernon Stewart

Mailing Address 5211 Mountain View Road

City

Winston-Salem

State

NC

Zip Code

27104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accountant

Occupation

Reynolds American

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12630

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS MARTHA SUMMERS

Mailing Address 3177 S GRANT ST

City

ENGLEWOOD

State

CO

Zip Code

80113

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12461

Amount of Each Receipt this Period

204.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: INC.A.12469

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

289.00

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 15 / 65

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANK M TAYLOR

Mailing Address PO BOX 1367

City

LYNNWOOD

State

WA

Zip Code

98046

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	8

Transaction ID: INC.A.12497

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MRS JOYCE B DOHENY

Mailing Address 4383 ROYAL PL

City

HONOLULU

State

HI

Zip Code

96816

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	8

Transaction ID: INC.A.12492

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Velmurugan Gurusamy

Mailing Address 4712 Ramies Run

City

Austin

State

TX

Zip Code

78749

FEC ID number of contributing
federal political committee.

C

Name of Employer
Computer ConsultantOccupation
Computing Inc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	8

Transaction ID: INC.A.12745

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

950.00

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 16 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MRS KATHRYN H HEIDE

Mailing Address 5825 6TH PL

City

KENOSHA

State

WI

Zip Code

53144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12428

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MRS KATHRYN H HEIDE

Mailing Address 5825 6TH PL

City

KENOSHA

State

WI

Zip Code

53144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12427

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS KATHRYN H HEIDE

Mailing Address 5825 6TH PL

City

KENOSHA

State

WI

Zip Code

53144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12429

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)

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

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

FOR LINE NUMBER: PAGE 17 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MRS MELBA HELLUMS

Mailing Address HC 82 BOX 270

City

OXFORD

State

AR

Zip Code

72565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12450

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

MRS MELBA HELLUMS

Mailing Address HC 82 BOX 270

City

OXFORD

State

AR

Zip Code

72565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12449

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

MR GEORGE C KUNKEL

Mailing Address 9552 HIGHEDGE DR

City

DALLAS

State

TX

Zip Code

75238

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUNT PETROLEUM CORP.

Occupation

RETIRED

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 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12456

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 18 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

ARMAND MORGANTE

Mailing Address 618 ORANGE AVE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
REITRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12398

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

ARMAND MORGANTE

Mailing Address 618 ORANGE AVE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
REITRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12399

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS CHRISTINE M RICHARDSON

Mailing Address 950 GROSSMONT AVE

City

EL CAJON

State

CA

Zip Code

92020

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

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 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12474

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

700.00

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 19 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12403

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

MRS MARTHA SUMMERS

Mailing Address 3177 S GRANT ST

City

ENGLEWOOD

State

CO

Zip Code

80113

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 8

Transaction ID: INC.A.12462

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City

CINCINNATI

State

OH

Zip Code

45215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12416

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

500.00

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 20 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS E BECKWITH

Mailing Address 24055 PASEO DEL LAGO
UNIT 1058

City State Zip Code
LAGUNA WOODS CA 92637

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
VOCATIONAL COUNSELOR, PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12482

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR THOMAS E BECKWITH

Mailing Address 24055 PASEO DEL LAGO
UNIT 1058

City State Zip Code
LAGUNA WOODS CA 92637

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
VOCATIONAL COUNSELOR, PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12483

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR THOMAS E BECKWITH

Mailing Address 24055 PASEO DEL LAGO
UNIT 1058

City State Zip Code
LAGUNA WOODS CA 92637

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
VOCATIONAL COUNSELOR, PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12481

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 21 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR HAROLD E BELDT

Mailing Address 2672 LILY AVE

City

SHELDON

State

IA

Zip Code

51201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12421

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR LOUIS J CARR

Mailing Address 1202 BOLTON ST

City

BALTIMORE

State

MD

Zip Code

21217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12392

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MS ANNETTE P CORREIA

Mailing Address 3507 E 27TH ST

City

TUCSON

State

AZ

Zip Code

85713

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12464

Amount of Each Receipt this Period

200.00

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 22 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR D ALLAN GAVAN

Mailing Address PO BOX 971

City

CENTER HARBOR

State

NH

Zip Code

3226

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12384

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

MYRL GOOD

Mailing Address 2707 CORONADO DR

City

ROSWELL

State

NM

Zip Code

88201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12468

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MR LAWRENCE HALL

Mailing Address PO BOX 728

City

ELIZABETHTOWN

State

KY

Zip Code

42702

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12413

Amount of Each Receipt this Period

200.00

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 23 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT HUFF

Mailing Address 1540 N COTNER BLVD APT 109

City

LINCOLN

State

NE

Zip Code

68505

FEC ID number of contributing
federal political committee.

C

Name of Employer
US POSTAL OFFICE

Occupation

RETIRED DIST CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12441

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR ROBERT HUFF

Mailing Address 1540 N COTNER BLVD APT 109

City

LINCOLN

State

NE

Zip Code

68505

FEC ID number of contributing
federal political committee.

C

Name of Employer
US POSTAL OFFICE

Occupation

RETIRED DIST CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12442

Amount of Each Receipt this Period

102.00

C.

Full Name (Last, First, Middle Initial)

MR EUGENE J IDONE

Mailing Address 75 HENRY ST

City

BROOKLYN

State

NY

Zip Code

11201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12386

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

302.00

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 24 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR HARRY H NEWTON

Mailing Address 10960 BATON ROUGE AVE

City

NORTHRIDGE

State

CA

Zip Code

91326

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED PROGRAM TRA-
INER

Occupation

RETIRED BUSINESS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12473

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MRS HILDA JUNE PIANTA

Mailing Address 150 OCEAN DR APT 2B

City

BATON ROUGE

State

LA

Zip Code

70806

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12446

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS HILDA JUNE PIANTA

Mailing Address 150 OCEAN DR APT 2B

City

BATON ROUGE

State

LA

Zip Code

70806

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12445

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 25 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation

RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12475

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS ELIZABETH WISKEMANN

Mailing Address 357 HIGHLAND AVE

City

SAN RAFAEL

State

CA

Zip Code

94901

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

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 / 0 6 / 2 0 0 8

Transaction ID: INC.A.12490

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES M BARBER

Mailing Address 200 HUBBELL ST

City

MARTELLE

State

IA

Zip Code

52305

FEC ID number of contributing
federal political committee.

C

Name of Employer
US TREASURY, IRS

Occupation

RETIRED COMPUTER PROGRAMMER

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 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12423

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

2300.00

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 26 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City

CINCINNATI

State

OH

Zip Code

45215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12417

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

CAPT JAMES E CRINER, RET

Mailing Address 2236 RACQUET CLUB DR

City

MURFREESBORO

State

TN

Zip Code

37128

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12411

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MRS SYLVIA DURYEE

Mailing Address 1115 41ST AVE E

City

SEATTLE

State

WA

Zip Code

98112

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12498

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1800.00

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 27 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR GEORGE C KUNKEL

Mailing Address 9552 HIGHEDGE DR

City

DALLAS

State

TX

Zip Code

75238

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUNT PETROLEUM CORP.

Occupation
RETIRED

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 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12457

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12433

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR DWIGHT W PITTS

Mailing Address 913 S COLLEEN LN

City

SIOUX FALLS

State

SD

Zip Code

57106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12430

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 28 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS BETTY J SHAW

Mailing Address 1448 GRAND BLVD

City

HOLIDAY

State

FL

Zip Code

34690

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12408

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS BETTY J SHAW

Mailing Address 1448 GRAND BLVD

City

HOLIDAY

State

FL

Zip Code

34690

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12409

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS JOY WILSON

Mailing Address RR 2 BOX 91

City

ARNETT

State

OK

Zip Code

73832

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12451

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)

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

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

FOR LINE NUMBER: PAGE 29 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS JOY WILSON

Mailing Address RR 2 BOX 91

City

ARNETT

State

OK

Zip Code

73832

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: INC.A.12452

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City

LENA

State

IL

Zip Code

61048

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12436

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM B GANNETT

Mailing Address 144 FREEDOM ST

City

HOPEDALE

State

MA

Zip Code

1747

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

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 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12383

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 30 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Robert Logan

Mailing Address 397 State Street PH2

City

Albany

State

NY

Zip Code

12210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12576

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM J MYHRE

Mailing Address 865 2ND AVE

City

SWEET HOME

State

OR

Zip Code

97386

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

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 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12495

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS JANICE B RUBEL

Mailing Address 2000 S BAYSHORE DR APT 68

City

MIAMI

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12404

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

620.00

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 31 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12470

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Visteva

Mailing Address 12881 Knott Street, Ste 105

City

Garden Grove

State

CA

Zip Code

92841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.3524

Amount of Each Receipt this Period

1027.50

C.

Full Name (Last, First, Middle Initial)

CAPT JAMES E WESTFALL

Mailing Address 1035 MAYFLOWER AVE

City

MELBOURNE

State

FL

Zip Code

32940

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. NAVY

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: INC.A.12397

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

1227.50

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 32 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR SOLOMON COOK

Mailing Address 303 STATE ROUTE 37

City

HOGANSBURG

State

NY

Zip Code

13655

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: INC.A.12388

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR JOSE G GONZALES

Mailing Address 1889 CALLE QUEDO # B

City

SANTA FE

State

NM

Zip Code

87505

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RETIRED CLERGY

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 / 0 9 / 2 0 0 8

Transaction ID: INC.A.12466

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MS BETTY J SHAW

Mailing Address 1448 GRAND BLVD

City

HOLIDAY

State

FL

Zip Code

34690

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: INC.A.12410

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 33 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS HELENE J WALKER

Mailing Address 23871 WILLOWS DR APT 256

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2801.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: INC.A.12485

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MR GEORGE C KUNKEL

Mailing Address 9552 HIGHEDGE DR

City

DALLAS

State

TX

Zip Code

75238

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUNT PETROLEUM CORP.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: INC.A.12458

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MRS TERRI S MERSEREAU

Mailing Address 961 LITTLE BEACH DR
PO BOX 2727

City

GEARHART

State

OR

Zip Code

97138

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: INC.A.12493

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2100.00

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 34 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS KAY G POITRAS

Mailing Address 27 LAKE HAMILTON BEACH

City

HAINES CITY

State

FL

Zip Code

33844

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

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 0 / 1 0 / 2 0 0 8

Transaction ID: INC.A.12406

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Gilia Rethman

Mailing Address 47-140 Heno Place

City

Kaneohe

State

Hi

Zip Code

96744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Consultant

Occupation

Self

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: INC.A.12613

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MRS ALICE E SUMIDA

Mailing Address 2309 SW 1ST AVE APT 1545

City

PORTLAND

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4103.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: INC.A.12494

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1550.00

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 35 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: INC.A.12471

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Anne Erskine

Mailing Address 41 Sullivan Chase Drive

City

Avondale

State

PA

Zip Code

19311

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 8

Transaction ID: INC.A.12545

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Velmurugan Gurusamy

Mailing Address 4712 Ramies Run

City

Austin

State

TX

Zip Code

78749

FEC ID number of contributing
federal political committee.

C

Name of Employer
Computer Consultant

Occupation
Computing Inc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 8

Transaction ID: INC.A.12746

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

200.00

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 36 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

George Krauss

Mailing Address 152 Longhorn Lane

City

Cheraw

State

SC

Zip Code

29520

FEC ID number of contributing
federal political committee.

C

Name of Employer
100% disabled Veteran

Occupation

N/N

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 8

Transaction ID: INC.A.12568

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Donna Noll

Mailing Address 1905 Corta Bella Drive

City

Las Vegas

State

NV

Zip Code

89134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sales

Occupation

Realty One Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 8

Transaction ID: INC.A.12597

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Edw. P. Passailaigue

Mailing Address 5685 Rolling Acres Lane

City

Cumming

State

GA

Zip Code

30028

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation

RET.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 8

Transaction ID: INC.A.12604

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

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 37 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Raymond Salzman

Mailing Address 11151 Rawhide Rd.

City

Lusby

State

MD

Zip Code

20657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 8

Transaction ID: INC.A.12621

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Len Long

Mailing Address 1104longviewdr

City

Newbern

State

NC

Zip Code

28562

FEC ID number of contributing
federal political committee.

C

Name of Employer
ret

Occupation
ret

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 8

Transaction ID: INC.A.12798

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

James Losleben

Mailing Address 815 Hazel Court

City

Mendota Heights

State

MN

Zip Code

55120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SR VP

Occupation
Cannon Technologies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 8

Transaction ID: INC.A.12578

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

185.00

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 38 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Barbara Neurohr

Mailing Address 6 Strawood Pt.

City

Homosassa

State

FL

Zip Code

34446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 8

Transaction ID: INC.A.12594

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Edw. P. Passailaigue

Mailing Address 5685 Rolling Acres Lane

City

Cumming

State

GA

Zip Code

30028

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation

RET.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 8

Transaction ID: INC.A.12605

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Leah Schatzki

Mailing Address 4 Larch Lane

City

Moraga

State

CA

Zip Code

94556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Billing analyst

Occupation

Chevron

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 8

Transaction ID: INC.A.12624

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

85.00

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 39 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Karen Wright

Mailing Address 1240 Gambier Road

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing
federal political committee.

C

Name of Employer
President

Occupation
Ariel Corp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 8

Transaction ID: INC.A.12937

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS FRANCES A BARR

Mailing Address 1130 BURNS AVE

City

CINCINNATI

State

OH

Zip Code

45215

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
TEACHER/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12418

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR EUGENE W BECKER

Mailing Address 1008 S LOGAN ST APT 12

City

LENA

State

IL

Zip Code

61048

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12437

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

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 40 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR THOMAS E BECKWITH

Mailing Address 24055 PASEO DEL LAGO
UNIT 1058

City State Zip Code
LAGUNA WOODS CA 92637

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
VOCATIONAL COUNSELOR, PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12484

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MS MARY JOAN BERG

Mailing Address 7663 WATSON RD APT 206

City State Zip Code
SAINT LOUIS MO 63119

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. ARMY AVIATION SYSTEMS
COMMAND

Occupation
RETIRED U.S. FEDERAL GOVERNMENT EMPLOY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12438

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR HAROLD BERGSTROM

Mailing Address PO BOX 184

City State Zip Code
MOHALL ND 58761

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12431

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

700.00

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 41 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Donna Digman

Mailing Address 2324-G S. Vineyard Ave

City

Ontario

State

CA

Zip Code

91761

FEC ID number of contributing
federal political committee.

C

Name of Employer
Manager

Occupation

Phillips Carbide Industries

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12539

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

MRS JEANEANE B DUNCAN

Mailing Address 306 SHADYWOOD RD

City

HOUSTON

State

TX

Zip Code

77057

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12459

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MS JOYCE B HEINRICH

Mailing Address 1148 BAYBERRY DR RM 109

City

WATERTOWN

State

WI

Zip Code

53098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

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 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12425

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1035.00

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 42 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MRS JANE A MORGAN

Mailing Address 213 RIVER HILLS CT

City

MCKINNEY

State

TX

Zip Code

75069

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12455

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

ARMAND MORGANTE

Mailing Address 618 ORANGE AVE

City

SEBASTIAN

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12400

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MRS JOYCE J RAYMOND

Mailing Address 10 SADDLEBACK RD

City

GALENA

State

IL

Zip Code

61036

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12435

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

600.00

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 43 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Raymond Salzman

Mailing Address 11151 Rawhide Rd.

City

Lusby

State

MD

Zip Code

20657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12622

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

William W. Squire

Mailing Address 39523 Via Montalvo

City

Murrieta

State

CA

Zip Code

92563

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12889

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City

SAN DIEGO

State

CA

Zip Code

92120

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAN DIEGO TRUCK CENTER

Occupation
RETIRED MECHANIC/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12476

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 44 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

LORAN F WILKENS

Mailing Address 625 S MAIN ST

City

HESSTON

State

KS

Zip Code

67062

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

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 0 / 1 3 / 2 0 0 8

Transaction ID: INC.A.12440

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

William Carluccio

Mailing Address 1463 Central Ave.

City

Westfield

State

NJ

Zip Code

07090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Warehouse Attendant

Occupation
Ford Motor Co.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12683

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR SOLOMON COOK

Mailing Address 303 STATE ROUTE 37

City

HOGANSBURG

State

NY

Zip Code

13655

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12389

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1400.00

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 45 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR FRANK CUSUMANO

Mailing Address 2009 N COMMERCE ST

City

STOCKTON

State

CA

Zip Code

95204

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12491

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD E KELLEY

Mailing Address 221 E ROCKWOOD BLVD APT 320

City

SPOKANE

State

WA

Zip Code

99202

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12501

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

MRS GLORIA V KELLEY

Mailing Address 221 E ROCKWOOD BLVD
APT 320

City

SPOKANE

State

WA

Zip Code

99202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12502

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

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 46 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM J MYHRE

Mailing Address 865 2ND AVE

City

SWEET HOME

State

OR

Zip Code

97386

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

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 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12496

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Helen Payne

Mailing Address 5131 Sandyfields Ln.

City

Katy

State

TX

Zip Code

77494

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12606

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MISS CLARICE M PETRICK

Mailing Address PO BOX 710

City

CHESTER

State

MT

Zip Code

59522

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12434

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 47 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MS JANET E SCHRODER

Mailing Address 75450 ROAD 330

City

GRANT

State

NE

Zip Code

69140

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12444

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MS MARGARET B W SMITH

Mailing Address 11750 SEABECK HWY NW

City

SEABECK

State

WA

Zip Code

98380

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12500

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MS YOLANDE H STRAWINSKI

Mailing Address 1130 SYLVAN PL

City

MONTEREY

State

CA

Zip Code

93940

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW YORK LIFE INSURANCE
CO.

Occupation
SELF-EMPLOYED INSURANCE AGENT/HOMEMAKE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12488

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)

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

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

FOR LINE NUMBER: PAGE 48 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND

Mailing Address 953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: INC.A.12472

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR WALTER C EICHENHOFER

Mailing Address 95 CONEJO CIR

City

PALM DESERT

State

CA

Zip Code

92260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: INC.A.12477

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MS JOYCE B HEINRICH

Mailing Address 1148 BAYBERRY DR RM 109

City

WATERTOWN

State

WI

Zip Code

53098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
HOMEMAKER

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 / 1 5 / 2 0 0 8

Transaction ID: INC.A.12426

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

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 49 / 65

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

MRS OWEDA V JOHNSEN

Mailing Address 3403 W CANYON LAKES DR

City

KENNEWICK

State

WA

Zip Code

99337

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: INC.A.12503

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MS YOLANDE H STRAWINSKI

Mailing Address 1130 SYLVAN PL

City

MONTEREY

State

CA

Zip Code

93940

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW YORK LIFE INSURANCE
CO.

Occupation

SELF-EMPLOYED INSURANCE AGENT/HOMEMAKE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: INC.A.12489

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)

30353.50

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

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

FOR LINE NUMBER: PAGE 50 / 65

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☒ 14 ☐ 15 ☐ 16 ☐ 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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)

Legacy Committee PAC

Mailing Address 30011 Ivy Glenn Dr., Ste 223

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C C00429084

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: RCV.A.3536

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

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 51 / 65

<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

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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Merchant gees

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.3540

Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

327.20

B.

Full Name (Last, First, Middle Initial)
James Lacy

Mailing Address 30011 Ivy Glenn Dr #223

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement
Meetings and conferences

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.3512

Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

4702.73

C.

Full Name (Last, First, Middle Initial)
Visteva

Mailing Address 12881 Knott Street, Ste 105

City Garden Grove State CA Zip Code 92841

Purpose of Disbursement
General websit service

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: EXP.B.3510

Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

127.50

SUBTOTAL of Disbursements This Page (optional)

5157.43

TOTAL This Period (last page this line number only)

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 52 / 65

<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

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 Campaign Fund

A. Full Name (Last, First, Middle Initial) Western CPAC	Transaction ID: EXP.B.3511 Date of Disbursement																				
Mailing Address 30011 Ivy Glenn Dr. Ste 223	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	8												
City Laguna Niguel State CA Zip Code 92677	Amount of Each Disbursement this Period																				
Purpose of Disbursement Conservative Political Conference Event Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Washington Intelligence Bureau	Transaction ID: EXP.B.3520 Date of Disbursement																				
Mailing Address 4128 Pepsi Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	0	8												
City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period																				
Purpose of Disbursement Admin accounting Candidate Name	<table border="1"> <tr> <td colspan="10">2826.90</td> </tr> </table>	2826.90																			
2826.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Barrett Garcia	Transaction ID: EXP.B.3519 Date of Disbursement																				
Mailing Address 32302 Camino Capistrano #214	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	7		2	0	0	8												
City San Juan Capistran State CA Zip Code 92675	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting services Candidate Name	<table border="1"> <tr> <td colspan="10">1035.00</td> </tr> </table>	1035.00																			
1035.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4361.90

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
National Campaign Fund

Full Name (Last, First, Middle Initial)
Landslide Communications

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

15000.00

001
Category/
Type

State: District:

Full Name (Last, First, Middle Initial)
Landslide Communications

Date of Disbursement

Amount of Each Disbursement this Period

5000.00

Category/ Type	001
-------------------	-----

State: District:

Full Name (Last, First, Middle Initial)
AMEX Fees

Date of Disbursement

Amount of Each Disbursement this Period

25.00

Category/ Type	001
-------------------	-----

State: District:

20025.00

A blank grid consisting of 10 columns and 2 rows of squares, intended for drawing a diagram.

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 54 / 65

<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

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 Campaign Fund

A. Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: EXP.B.12359 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	0	8												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">1379.53</td> </tr> </table>	1379.53																			
1379.53																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: EXP.B.12360 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	0	8												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">217.99</td> </tr> </table>	217.99																			
217.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: EXP.B.12361 Date of Disbursement																				
Mailing Address 1 Western Maryland Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	0	8												
City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">182.65</td> </tr> </table>	182.65																			
182.65																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1780.17

TOTAL This Period (last page this line number only)

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 55 / 65

<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

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 Campaign Fund

A.

Full Name (Last, First, Middle Initial)
Barrett Garcia

Mailing Address 32302 Camino Capistrano #214

City State Zip Code
San Juan Capistran CA 92675

Purpose of Disbursement
Accounting services

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: EXP.B.12366
Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

1457.50

B.

Full Name (Last, First, Middle Initial)
SunTrust Merchant Services

Mailing Address 1 Western Maryland Parkway

City State Zip Code
Hagerstown MD 21740

Purpose of Disbursement
Merchant fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: EXP.B.12364
Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

1507.50

TOTAL This Period (last page this line number only)

32832.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 56 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Excellentia Inc.		Date MM / DD / YYYY 10 / 01 / 2008	
Mailing Address 4224 67th Ave CT W		Amount 5497.50	
City State Zip Code University Place WA 98466		Transaction ID: EDT.EALC.195	
Purpose of Expenditure Book publishing		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
312220.01			
Full Name (Last, First, Middle, Initial) of Payee The Richard Norman Company		Date MM / DD / YYYY 10 / 02 / 2008	
Mailing Address 44084 Riverside Parkway, #350		Amount 2083.64	
City State Zip Code Lansdowne VA 20176		Transaction ID: EDT.EALC.196	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
312220.01			
(a) SUBTOTAL of Itemized Independent Expenditures		7581.14	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 10 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 57 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Richard Norman Company		Date MM / DD / YYYY 10 / 02 / 2008	
Mailing Address 44084 Riverside Parkway, #350		Amount 9968.90	
City State Zip Code Lansdowne VA 20176		Transaction ID: EDT.EALC.197	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
312220.01			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 06 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 2202.59	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.198	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
906374.81			
(a) SUBTOTAL of Itemized Independent Expenditures		12171.49	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 10 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 58 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 06 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 13225.06	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.199	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 906374.81		2008	

Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 07 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5652.33	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.200	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 906374.81		2008	

(a) SUBTOTAL of Itemized Independent Expenditures	18877.39
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy
Signature

Date MM / DD / YYYY
10 / 29 / 2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 59 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date MM / DD / YYYY 10 / 08 / 2008	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 4660.13	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.210	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
906374.81			
Full Name (Last, First, Middle, Initial) of Payee Postmaster		Date MM / DD / YYYY 10 / 10 / 2008	
Mailing Address 8 Herbert Street		Amount 1000.00	
City State Zip Code Alexandria VA 22305		Transaction ID: EDT.EALC.212	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
906374.81			
(a) SUBTOTAL of Itemized Independent Expenditures		5660.13	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 10 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 60 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee C4Strategies		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>10 / 13 / 2008</div> </div>	
Mailing Address 8230 Catbird Circle #302		Amount 20395.17	
<div style="display: flex; justify-content: space-between;"> <div>City Lorton</div> <div>State VA</div> <div>Zip Code 22079</div> </div>		Transaction ID: EDT.EALC.201	
Purpose of Expenditure Website services		<div style="display: flex; justify-content: space-between;"> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential </div> <div> State: _____ District: _____ </div> </div>	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 312220.01		<input type="checkbox"/> Other (specify) : _____ 2008	

Full Name (Last, First, Middle, Initial) of Payee Eagle Publishing		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>10 / 13 / 2008</div> </div>	
Mailing Address One Massachusetts Ave., 6th Floor		Amount 970.00	
<div style="display: flex; justify-content: space-between;"> <div>City Washington</div> <div>State DC</div> <div>Zip Code 20001</div> </div>		Transaction ID: EDT.EALC.203	
Purpose of Expenditure E-mail broadcasts		<div style="display: flex; justify-content: space-between;"> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential </div> <div> State: _____ District: _____ </div> </div>	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 312220.01		<input type="checkbox"/> Other (specify) : _____ 2008	

(a) SUBTOTAL of Itemized Independent Expenditures	21365.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Lacy
Signature

Date

MM / DD / YY

10 / 29 / 2008

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 61 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Strategic Services Advisors		Date MM / DD / YYYY 10 / 13 / 2008	
Mailing Address 3110 Judson St. PMB #221		Amount 2000.00	
City State Zip Code Gig Harbor WA 98335		Transaction ID: EDT.EALC.204	
Purpose of Expenditure Website services		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 312220.01		2008	
Full Name (Last, First, Middle, Initial) of Payee C4Strategies		Date MM / DD / YYYY 10 / 14 / 2008	
Mailing Address 8230 Catbird Circle #302		Amount 3608.99	
City State Zip Code Lorton VA 22079		Transaction ID: EDT.EALC.205	
Purpose of Expenditure List rentals		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 312220.01		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		5608.99	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date MM / DD / YYYY 10 / 29 / 2008	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 62 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER ▼ C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eagle Publishing		Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8	
Mailing Address One Massachusetts Ave., 6th Floor		Amount 8608.00	
City State Zip Code Washington DC 20001		Transaction ID: EDT.EALC.206	
Purpose of Expenditure E-mail broadcasts		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
312220.01			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 3323.08	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.211	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
906374.81			
(a) SUBTOTAL of Itemized Independent Expenditures		11931.08	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 63 / 65

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Campaign Fund		FEC IDENTIFICATION NUMBER C C00437822	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 5907.84	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.213	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
906374.81			
Full Name (Last, First, Middle, Initial) of Payee Mid America Printing		Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8	
Mailing Address 2070 Chain Bridge Rd # 520		Amount 9109.79	
City State Zip Code Vienna VA 22182		Transaction ID: EDT.EALC.214	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
906374.81			
(a) SUBTOTAL of Itemized Independent Expenditures		15017.63	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		98213.02	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
James Lacy Signature		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8	

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 64 / 65

FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
National Campaign Fund

Transaction ID: RCV:C:84

LOAN SOURCE Full Name (Last, First, Middle Initial)
Legacy Committee PAC

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 30011 Ivy Glenn Dr., Ste 223

City Laguna Niguel State CA ZIP Code 92677

Original Amount of Loan

5000.00

Cumulative Payment To Date

5000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 6D D
0 6Y Y Y Y
2 0 0 8

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 65 / 65

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
National Campaign Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Response Dynamics, Inc.

Nature of Debt (Purpose):
P.O.Box and bulk rate mai-
ling account deposit

Mailing Address 2070 Chain Bridge Rd # 520

City	State	ZIP Code
Vienna	VA	22182

Outstanding Balance Beginning This Period

1960.00

Transaction ID: PAY:D:107

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1960.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1960.00

2) **TOTALS** This Period (last page this line number only)..... ▶

1960.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

1960.00