

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
OUR CONGRESS POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO Box 344
 Check if different than previously reported. (ACC)
Prescott AR 71857

2. **FEC IDENTIFICATION NUMBER** C00402412
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 09 01 2008 through 09 30 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 Vickie L. Winpisinger

Signature of Treasurer Electronically Filed by Vickie L. Winpisinger Date 10 15 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
OUR CONGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		34930.81
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	44199.04									
(c) Total Receipts (from Line 19)	2500.00	72508.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46699.04	107438.83								
7. Total Disbursements (from Line 31)	40515.08	101254.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6183.96	6183.96								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
OUR CONGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	0.00	3000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	3000.00
(b) Political Party Committees	0.00	8.02
(c) Other Political Committees (such as PACs)	2500.00	69500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2500.00	72508.02
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2500.00	72508.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2500.00	72508.02

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.....	1515.08	9754.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1515.08	9754.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	39000.00	89500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	40515.08	101254.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40515.08	101254.87

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2500.00	72508.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2500.00	72508.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1515.08	9754.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1515.08	9754.87

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **175 E. Houston Street**
Room 7-A-50

City **San Antonio** State **TX** Zip Code **78205**

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 0 8 / 2 0 0 8

Transaction ID: C142

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc. <hr/> Mailing Address 315 Inspiration Lane <hr/> City Gaithersburg State MD Zip Code 20878 <hr/> Purpose of Disbursement Administrative services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D269 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
B. Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc. <hr/> Mailing Address 315 Inspiration Lane <hr/> City Gaithersburg State MD Zip Code 20878 <hr/> Purpose of Disbursement Postage reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D270 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 15.08

SUBTOTAL of Disbursements This Page (optional) ►

1515.08

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

1515.08

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ARCURI FOR CONGRESS</p> <p>Mailing Address P.O. Box 8508</p> <p>City Utica State NY Zip Code 13505</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Michael A Arcuri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D297 Date of Disbursement: 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) BRIGHT FOR CONGRESS.COM</p> <p>Mailing Address P.O.Box 2106</p> <p>City Montgomery State AL Zip Code 36102</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Bobby Neal Bright, Sr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D277 Date of Disbursement: 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC</p> <p>Mailing Address 912 KINGS HIGHWAY</p> <p>City SHREVEPORT State LA Zip Code 71104</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Paul J. Carmouche</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D272 Date of Disbursement: 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CARNEY FOR CONGRESS</p> <p>Mailing Address P.O. Box A</p> <p>City Clarks Summit State PA Zip Code 18411</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Christopher P Carney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D284 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS</p> <p>Mailing Address PO BOX 156</p> <p>City NEW ROADS State LA Zip Code 70802</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Donald J Cazayoux</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D285 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="5000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) CHRISTINE JENNINGS FOR CONGRESS</p> <p>Mailing Address PO Box 49135</p> <p>City Sarasota State FL Zip Code 34230</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Christine Jennings</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D271 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DAVID BOSWELL TO CONGRESS</p> <p>Mailing Address 5591 PANTHER CREEK PARK DRIVE</p> <p>City OWENSBORO State KY Zip Code 42301</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name David E. Boswell <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281 Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) DONALD CRAVINS JR FOR CONGRESS</p> <p>Mailing Address PO BOX 2507</p> <p>City OPELOUSAS State LA Zip Code 70570</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Donald Cravins, Jr. <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D273 Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ELLSWORTH FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box 62</p> <p>City Evansville State IN Zip Code 47701</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Brad Ellsworth <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D287 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM MARSHALL	Transaction ID: D293 Date of Disbursement
	Mailing Address 586 Orange Street	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Macon State GA Zip Code 31201	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Jim Marshall	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARROW	Transaction ID: D282 Date of Disbursement
	Mailing Address PO Box 8166	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Savannah State GA Zip Code 31412	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name John J. Barrow	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS	Transaction ID: D288 Date of Disbursement
	Mailing Address PO Box 12886	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Tucson State AZ Zip Code 85732	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Gabrielle Giffords	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) GILLIBRAND FOR CONGRESS	Transaction ID: D289 Date of Disbursement 09 / 23 / 2008
	Mailing Address P.O. Box 15734	
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Kirsten E. Gillibrand Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) GRIFFITH FOR CONGRESS	Transaction ID: D276 Date of Disbursement 09 / 04 / 2008
	Mailing Address PO BOX 2916	
	City Huntsville State AL Zip Code 35804	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name R. Parker Griffith Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL	Transaction ID: D291 Date of Disbursement 09 / 23 / 2008
	Mailing Address PO Box 1071	
	City Seymour State IN Zip Code 47274	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Baron P Hill Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JILL DERBY FOR CONGRESS <hr/> Mailing Address PO BOX 1901 <hr/> City MINDEN State NV Zip Code 89423 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name Jill T. Derby Category/Type <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: NV District: 02	Transaction ID: D279 Date of Disbursement <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>0</td><td>9</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	4	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	0	4	/	2	0	0	8														
1000.00																							
B.	Full Name (Last, First, Middle Initial) JOE DONNELLY FOR CONGRESS <hr/> Mailing Address PO Box 1961 <hr/> City South Bend State IN Zip Code 46634 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name Joe Donnelly Category/Type <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: IN District: 02	Transaction ID: D286 Date of Disbursement <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>0</td><td>9</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	3	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	2	3	/	2	0	0	8														
1000.00																							
C.	Full Name (Last, First, Middle Initial) JOE GARCIA FOR CONGRESS <hr/> Mailing Address 12930 SW 128 Street Suite 102 <hr/> City Miami State FL Zip Code 33186 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name Joe Garcia Category/Type <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: FL District: 25	Transaction ID: D280 Date of Disbursement <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>0</td><td>9</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	7	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	1	7	/	2	0	0	8														
1000.00																							

SUBTOTAL of Disbursements This Page (optional)	3000.00
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)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MELISSA BEAN FOR CONGRESS

Mailing Address PO BOX 3068

City BARRINGTON State IL Zip Code 60010

Purpose of Disbursement
Contribution

Candidate Name
Melissa L Bean

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 08

Transaction ID: D283

Date of Disbursement

09 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MINNICK FOR CONGRESS

Mailing Address 8150 W EMERALD STREET SUITE 170

City Boise State ID Zip Code 83704

Purpose of Disbursement
Contribution

Candidate Name
Walter Clifford Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D274

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
MOORE FOR CONGRESS

Mailing Address PO BOX 14631

City Shawnee Mission State KS Zip Code 66285

Purpose of Disbursement
Contribution

Candidate Name
Dennis W Moore

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: KS District: 03

Transaction ID: D294

Date of Disbursement

09 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PATRICK MURPHY FOR CONGRESS</p> <p>Mailing Address P.O. Box 868</p> <p>City Levittown State PA Zip Code 19058</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Patrick J Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D295 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA</p> <p>Mailing Address PO Box 2009</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Stephanie Herseth-Sandlin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D290 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) TIM MAHONEY FOR FLORIDA</p> <p>Mailing Address 2000 PGA Blvd. Suite 3230</p> <p>City Palm Beach Gardens State FL Zip Code 33408</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Tim Mahoney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D292 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 16 / 16

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

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NAME OF COMMITTEE (In Full)
OUR CONGRESS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) TINKLENBERG FOR CONGRESS <hr/> Mailing Address 9298 CENTRAL AVE NE <hr/> City BLAINE State MN Zip Code 55434 <hr/> Purpose of Disbursement Contribution Candidate Name Elwyn Glenn Tinklenberg Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D278 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2008
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS COMMITTEE <hr/> Mailing Address 123 West High Avenue <hr/> City New Philadelphia State OH Zip Code 44663 <hr/> Purpose of Disbursement Contribution Candidate Name Zachary T Space Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D296 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2008
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

39000.00