

**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

ESOP PAC

ADDRESS (number and street) 1726 M Street, N.W.
Suite 501
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00196089
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 07 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 J. Michael Keeling, Esq.

Signature of Treasurer Electronically Filed by J. Michael Keeling, Esq. Date 10 30 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)
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ESOP PAC

Report Covering the Period: From:

M	M
0	7

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		5675.50
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	27633.38									
(c) Total Receipts (from Line 19)	12529.00	71288.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40162.38	76963.79								
7. Total Disbursements (from Line 31)	28680.83	65482.24								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11481.55	11481.55								
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
ESOP PAC

Report Covering the Period: From:

M	M
0	7

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	12529.00	67788.29
(i) Itemized (use Schedule A)	0.00	1000.00
(ii) Unitemized	12529.00	68788.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	2500.00
(c) Other Political Committees (such as PACs)	0.00	71288.29
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	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))	12529.00	71288.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12529.00	71288.29

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28250.00	64850.00
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.....	430.83	632.24
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))..	28680.83	65482.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28680.83	65482.24

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)	12529.00	71288.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12529.00	71288.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 19
(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)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
Mr. Bruce Armstrong

Mailing Address 300 Harvard Road

City State Zip Code
San Mateo CA 94402

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

Name of Employer Menke & Associates Occupation Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.6502

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Louis J. Baccei

Mailing Address 4 Turtle Dove Lane

City State Zip Code
Hilton Head SC 29926

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

Name of Employer Reflexite Corp. Occupation Board of Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	8

Transaction ID: SA11AI.6507

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Dagle

Mailing Address P.O. Box 60

City State Zip Code
Selinsgrove PA 17870

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

Name of Employer L/B Water Service Occupation executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.6499

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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: (check only one)	PAGE 7 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) Ms Nancy Dittmer	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 400 Locust Street Suite 640	Transaction ID: SA11AI.6504
	City Des Moines State IA Zip Code 50309	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer RSM McGladrey, Inc. Occupation CPA	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Robert W. Edwards, Esq.	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address One Citizens Plaza	Transaction ID: SA11AI.6503
	City Providence State RI Zip Code 02903	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Nixon Peabody LLP Occupation Attorney	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00

C.	Full Name (Last, First, Middle Initial) Mr. Thomas Feeley	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 200 Portland Street	Transaction ID: SA11AI.6501
	City Boston State MA Zip Code 02114	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Feeley & Driscoll, P.C. Occupation Managing Director	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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 / 19
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert A. Fulton

Mailing Address 377 Simarano Drive

City Marlborough State MA Zip Code 01752

FEC ID number of contributing federal political committee. C

Name of Employer Web Industries, Inc. Occupation Board Chair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 04 / 2008
Transaction ID: SA11AI.6513

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Dennis J. Lattimer

Mailing Address 377 Simarano Drive

City Marlborough State MA Zip Code 01752

FEC ID number of contributing federal political committee. C

Name of Employer Web Industries, Inc. Occupation Executive VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2008
Transaction ID: SA11AI.6511

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Carl T. Lind

Mailing Address 388 Simarano Drive

City Marlborough State MA Zip Code 01752

FEC ID number of contributing federal political committee. C

Name of Employer Web Industries, Inc. Occupation Board of Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2008
Transaction ID: SA11AI.6505

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
Mr. David M. Nolf

Mailing Address 120 Darling Drive

City Avon State CT Zip Code 06001

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

Name of Employer Reflexite Corp. Occupation Retired Board Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2008
Transaction ID: SA11AI.6515
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald J. Romine

Mailing Address 377 Simarano Drive

City Marlborough State MA Zip Code 01752

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

Name of Employer Web Industries, Inc. Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 04 / 2008
Transaction ID: SA11AI.6517
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Ms Unitemized Unitemized

Mailing Address 1726 M Street, N.W. Suite 501

City Washington State DC Zip Code 20036

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

Name of Employer ESOP PAC Occupation PAC administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10819.50

Date of Receipt 09 / 30 / 2008
Transaction ID: SA11AI.6498
Amount of Each Receipt this Period 5979.00

SUBTOTAL of Receipts This Page (optional) ► 7229.00

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 / 19	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.

Full Name (Last, First, Middle Initial)
Mr. James M. Willey

Mailing Address P.O. Box 487

City	State	Zip Code
Rye Beach	NH	03871

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

Name of Employer Web Industries, Inc.	Occupation Board of Director
--	---------------------------------

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: SA11AI.6509

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	12529.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) CANTOR FOR CONGRESS <hr/> Mailing Address P. O. Box 17813 <hr/> City Richmond State VA Zip Code 23226 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 07	Transaction ID: SB23.6483 Date of Disbursement <input type="text" value="07"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="08"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
B.	Full Name (Last, First, Middle Initial) CITIZENS FOR TOM PETRI <hr/> Mailing Address PO BOX 270 <hr/> City FOND DU LAC State WI Zip Code 54935 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 06	Transaction ID: SB23.6480 Date of Disbursement <input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="500.00"/>
C.	Full Name (Last, First, Middle Initial) COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC), THE <hr/> Mailing Address P.O. Box 65314 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.6465 Date of Disbursement <input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
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 / 19

<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)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2000	Transaction ID: SB23.6486 Date of Disbursement
	Mailing Address 5915 EASTMAN AVENUE SUITE 100	<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City MIDLAND State MI Zip Code 48640	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ERIC PAC	Transaction ID: SB23.6481 Date of Disbursement
	Mailing Address 209 Pennsylvania Avenue, S.E.	<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	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) FRIENDS OF GORDON SMITH	Transaction ID: SB23.6470 Date of Disbursement
	Mailing Address 228 S WASHINGTON STE 115	<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	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="4500.00"/>
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 13 / 19

<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)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN TANNER <hr/> Mailing Address POST OFFICE BOX 1994 <hr/> City UNION CITY State TN Zip Code 38281 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 08	Transaction ID: SB23.6485 Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2008 <hr/> Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
B.	Full Name (Last, First, Middle Initial) FRIENDS OF MAURICE HINCHEY <hr/> Mailing Address PO Box 4497 <hr/> City Kingston State NY Zip Code 12402 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 22	Transaction ID: SB23.6475 Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2008 <hr/> Amount of Each Disbursement this Period <input type="text" value="500.00"/>
C.	Full Name (Last, First, Middle Initial) FRIENDS OF SAM JOHNSON <hr/> Mailing Address PO BOX 860096 <hr/> City PLANO State TX Zip Code 75086 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 03	Transaction ID: SB23.6482 Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2008 <hr/> Amount of Each Disbursement this Period <input type="text" value="500.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
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)

<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)
ESOP PAC

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

Mailing Address 235 South Main Street

City Rocky Mount State VA Zip Code 24151

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President
State: VA District: 05

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6484
Date of Disbursement: 08 / 05 / 2008

Amount of Each Disbursement this Period
500.00

B. Full Name (Last, First, Middle Initial)
HELPING ENSURE RESPONSIBLE GOVERNMENT BY ELECTING REPUBLICANS (H.E.R.G.E.R. PAC)

Mailing Address PO Box 984

City Willows State CA Zip Code 95988

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6466
Date of Disbursement: 07 / 10 / 2008

Amount of Each Disbursement this Period
1000.00

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

Mailing Address 30636 DEQUINDRE

City WARREN State MI Zip Code 48092

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President
State: MI District: 12

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6494
Date of Disbursement: 09 / 19 / 2008

Amount of Each Disbursement this Period
1000.00

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)

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<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)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
MIKE CRAPO FOR US SENATE

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 00

Transaction ID: SB23.6468

Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 5401 STONE CREEK CIRCLE SUITE 777

City LOVELAND State CO Zip Code 80538

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.6491

Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

500.00

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

Mailing Address 7840 Red Leaf Drive

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NV District: 03

Transaction ID: SB23.6495

Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) RANGEL VICTORY FUND	Transaction ID: SB23.6476 Date of Disbursement 07 / 14 / 2008
	Mailing Address 818 CONNECTICUT AVENUE NW STE 1100	Amount of Each Disbursement this Period 5000.00
	City WASHINGTON State DC Zip Code 20006	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)	Transaction ID: SB23.6478 Date of Disbursement 07 / 16 / 2008
	Mailing Address PO BOX 1011	Amount of Each Disbursement this Period 500.00
	City WHEATON State IL Zip Code 60187	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) ROSKAM FOR CONGRESS COMMITTEE	Transaction ID: SB23.6472 Date of Disbursement 07 / 10 / 2008
	Mailing Address P. O. Box 713	Amount of Each Disbursement this Period 1000.00
	City Wheaton State IL Zip Code 60187	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 06	

SUBTOTAL of Disbursements This Page (optional)	6500.00
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)

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<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)
ESOP PAC

A. Full Name (Last, First, Middle Initial)
ROSKAM FOR CONGRESS COMMITTEE

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: IL District: 06

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6488

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: IL District: 06

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6489

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address PO BOX 1919

City JANESVILLE State WI Zip Code 53547

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: WI District: 01

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.6464

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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)

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<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)
ESOP PAC

<p>A. Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO BOX 1500</p> <p>City CHICO State CA Zip Code 95927</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA 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: SB23.6492</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) WALTER JONES COMMITTEE 2006</p> <p>Mailing Address PO BOX 99667</p> <p>City RALEIGH State NC Zip Code 27624</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6487</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2000.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value="28250.00"/></p>

**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)

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

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NAME OF COMMITTEE (In Full)
ESOP PAC

A.	Full Name (Last, First, Middle Initial) Bank Charges	Transaction ID: SB29.6497 Date of Disbursement
	Mailing Address P.O. Box 96758 1800 M Street, N.W.	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20090	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="430.83"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="430.83"/>
TOTAL This Period (last page this line number only)	<input type="text" value="430.83"/>