

**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 linesNational Association of Insurance and Financial Advisors Political Action Commit-
tee

ADDRESS (number and street) ▼

2901 Telestar Court

☐Check if different
than previously
reported. (ACC)

Falls Church

VA

22042

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00005249

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

11

07

2006

in the
State of

VA

(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

2006

through

10

18

2006

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

Peter C. Browne

Signature of Treasurer

Electronically Filed by Peter C. Browne

Date

10

30

2006

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. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Committee

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 1 | 0 | 0 | 1 | 2 | 0 | 0 | 6 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 1 | 0 | 1 | 8 | 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 2006 | | 537428.48 |
| (b) Cash on Hand at Beginning of Reporting Period | 240354.16 | |
| (c) Total Receipts (from Line 19) | 73923.86 | 834662.95 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 314278.02 | 1372091.43 |
| 7. Total Disbursements (from Line 31) | 308560.00 | 1366373.41 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 5718.02 | 5718.02 |
| 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) | 111077.14 | |

☒ 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. 02/2003)

Page 3

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Committee

Report Covering the Period:

From:

M M
1 0D D
0 1Y Y Y Y
2 0 0 6

To:

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

| 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 | 25696.39 | 264744.05 |
| (i) Itemized (use Schedule A) | 48227.47 | 567418.90 |
| (ii) Unitemized | 73923.86 | 832162.95 |
| (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) ➡ | 73923.86 | 832162.95 |
| 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 | 2500.00 |
| 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)) | 73923.86 | 834662.95 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 73923.86 | 834662.95 |

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..... | 25500.00 | 199883.41 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡ | 25500.00 | 199883.41 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 283000.00 | 1165250.00 |
| 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 | 60.00 | 1240.00 |
| (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)) | 60.00 | 1240.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 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)).. | 308560.00 | 1366373.41 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 308560.00 | 1366373.41 |

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) | 73923.86 | 832162.95 |
| 34. Total Contribution Refunds (from Line 28(d)) | 60.00 | 1240.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 73863.86 | 830922.95 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 25500.00 | 199883.41 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 25500.00 | 199883.41 |

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

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

FOR LINE NUMBER: PAGE 6 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Michael J. Ables, LUTCF

Mailing Address PO Box 2205

City State Zip Code
 Avila Beach CA 93424-2205

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

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

Transaction ID: R1642115

Amount of Each Receipt this Period

105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City State Zip Code
 Las Vegas NV 89130

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

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

Transaction ID: R1639806

Amount of Each Receipt this Period

72.00

Payroll Deduction

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

Mr. Karl W. Albrecht, CEBS

Mailing Address 1745 Balsam Way

City State Zip Code
 Milford MI 48381

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1643261

Amount of Each Receipt this Period

500.00

Check

SUBTOTAL of Receipts This Page (optional)

677.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr Emmette F. Albritton, II, LUTC

Mailing Address 20683 Running Creek Church Road
Suite A

City State Zip Code
Stanfield NC 28163

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.75

Date of Receipt

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

Transaction ID: R1643251

Amount of Each Receipt this Period

13.75

Check

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

Mailing Address 414 McCall Street

City State Zip Code
Waukesha WI 53186-6009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1641303

Amount of Each Receipt this Period

30.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Ms. Susan Jane Allen, LUTC

Mailing Address 331 S. Brookfield Road

City State Zip Code
Brookfield WI 53045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.80

Date of Receipt

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

Transaction ID: R1642908

Amount of Each Receipt this Period

6.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

49.75

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 8 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Susan Jane Allen, LUTCF
Mailing Address 331 S. Brookfield Road

City State Zip Code
Brookfield WI 53045

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.80

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: R1643365

Amount of Each Receipt this Period

-6.00

RT

B. Full Name (Last, First, Middle Initial)
Ms. Carol A. Anderson, LUTCF, CFP
Mailing Address 717 N. 87th St.

City State Zip Code
Omaha NE 68114

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1642749

Amount of Each Receipt this Period

50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Robert B. Anderson, CLU
Mailing Address 1456 Old Boones Creek Road

City State Zip Code
Jonesborough TN 37659

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

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

Transaction ID: R1642743

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

94.00

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 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. William C. Anderson, LUTC

Mailing Address 205 Whippoorwill Lane

City State Zip Code
 Altamonte Spgs FL 32701-7827

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643081

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Russell S. Andrews, CLU, ChFC

Mailing Address 106 W Jefferson St #601

City State Zip Code
 Syracuse NY 13202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1642377

Amount of Each Receipt this Period

50.00

Payroll Deduction

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

Ms. Joan A. Antonello

Mailing Address 530 5th Ave
 14th Fl.

City State Zip Code
 New York NY 10036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641554

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

96.00

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 10 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Glenn J. Arons, CFP, ChFC
Mailing Address 14710 Pettit Way

City State Zip Code
Potomac MD 20854-6015

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1643558

Amount of Each Receipt this Period

120.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Douglas Austin, CLU
Mailing Address Suite 9 Kite Hill Rd

City State Zip Code
Santa Cruz CA 95060-1418

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641992

Amount of Each Receipt this Period

22.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. William H. Barbee, III
Mailing Address 258 Mesa Avenue

City State Zip Code
Newbury Park CA 91320-4547

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1639891

Amount of Each Receipt this Period

12.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

155.00

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 11 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. James T. Bardin, CLU, ChFC

Mailing Address 4226 Fairway Circle

City State Zip Code
Tampa FL 33624-4640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641216

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Joseph Barker, III, CLU

Mailing Address 10250 Regency Circle, #250

City State Zip Code
Omaha NE 68114-3735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642614

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Thom E. Beasley

Mailing Address 1103 Dove Rd.

City State Zip Code
Jonesboro AR 72401-5270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.00

Date of Receipt

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

Transaction ID: R1642217

Amount of Each Receipt this Period

81.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

124.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. John C. Beckwith
Mailing Address 1908 Greenbriar Drive

City State Zip Code
Portage MI 49024-5787

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642520

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Michael E. Behar
Mailing Address 2319 Cheshire Woods Rd

City State Zip Code
Toledo OH 43617-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1642030

Amount of Each Receipt this Period

22.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Daniel C. Bell
Mailing Address P. O. Box 1747

City State Zip Code
Cleveland MS 38732-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641060

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

89.50

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Kent A. Bennett, LUTCF, CEP

Mailing Address 280 Hollow Road

City State Zip Code
Muncy PA 17756

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3375.00

Date of Receipt

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

Transaction ID: R1643104

Amount of Each Receipt this Period

87.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Robert A. Berg, CLU, LUTCF

Mailing Address 1405 Blackberry Lane

City State Zip Code
Stevens Point WI 54481-9140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1641849

Amount of Each Receipt this Period

30.00

Payroll Deduction

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

Mr. James R. Bertine, FIC, LUTCF

Mailing Address 2935 S. Columbus St.

City State Zip Code
Arlington VA 22206-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1639910

Amount of Each Receipt this Period

22.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

140.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Thomas C. Besselman
Mailing Address 6421 Perkins Rd # 2b

City State Zip Code
Baton Rouge LA 70808-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: R1641674

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. David B. Bianchi, CLU
Mailing Address 1125 Beldon Way

City State Zip Code
Reno NV 89503-3164

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1642335

Amount of Each Receipt this Period

60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. J. Blayne Bird
Mailing Address 315 Willow Drive

City State Zip Code
Blackfoot ID 83221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

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

Transaction ID: R1641023

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Harlynn N. Bjerke, LUTCF

Mailing Address P. O. Box 144

City State Zip Code
 Adams ND 58210-0144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

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

Transaction ID: R1641439

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City State Zip Code
 Oil City LA 71061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

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

Transaction ID: R1641249

Amount of Each Receipt this Period

50.00

Payroll Deduction

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

Mr. Brian D. Boesiger, CSA, LUTC

Mailing Address 7021 S. 33rd Street

City State Zip Code
 Lincoln NE 68516-4886

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: R1640029

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

105.20

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Guy S. Bowering
Mailing Address 129 Woodland Hills Blvd.

City State Zip Code
Madison MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.50

Date of Receipt

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

Transaction ID: R1643054

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. John J. Bradley, CLU
Mailing Address 148 Grove Street

City State Zip Code
Westwood MA 02090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

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

Transaction ID: R1642168

Amount of Each Receipt this Period

41.66

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Gary A. Bramer, CLU, ChFC
Mailing Address 269 San Felipe Way

City State Zip Code
Novato CA 94945-1687

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1642703

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

114.16

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. John G. Brandt, LUTCF, FIC

Mailing Address 2103 Sunset Lane

City State Zip Code
La Crosse WI 54601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.60

Date of Receipt

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

Transaction ID: R1641930

Amount of Each Receipt this Period

30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. William J. Brannon, CLU, CPCU

Mailing Address 5215 Mockingbird Road

City State Zip Code
Greensboro NC 27406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: R1642767

Amount of Each Receipt this Period

23.10

Payroll Deduction

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

Mr. Ronald D. Brant, CLU, LUTCF

Mailing Address 10234 Hoffman

City State Zip Code
Maybee MI 48159-9777

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1406.00

Date of Receipt

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

Transaction ID: R1642856

Amount of Each Receipt this Period

208.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

261.10

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Frank H. Briggs, Jr., CLU, C

Mailing Address 2610 Bohler Rd NW

City State Zip Code
 Atlanta GA 30327-1418

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1642840

Amount of Each Receipt this Period

50.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Delford G. Britton

Mailing Address 1736 Jefferson Street

City State Zip Code
 Napa CA 94559-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641544

Amount of Each Receipt this Period

21.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Albert B. Brodbeck, CLU

Mailing Address 56 Dundee Road

City State Zip Code
 Stamford CT 06903-3623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1642265

Amount of Each Receipt this Period

12.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

83.50

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. C. Robert Brown, Sr., CLU, L

Mailing Address 8675 WestCott

City State Zip Code
 Germantown TN 38138-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: R1641019

Amount of Each Receipt this Period

62.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. James Walter Brown, LUTC

Mailing Address 6334 Deveron Drive

City State Zip Code
 Charlotte NC 28211-4612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: R1641090

Amount of Each Receipt this Period

23.10

Payroll Deduction

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

Mr. Michael O. Brown, LUTC

Mailing Address 6512 Nell 3

City State Zip Code
 Edmond OK 73013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1642624

Amount of Each Receipt this Period

60.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

145.60

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Ms. Patricia Beal Brown

Mailing Address PO Box 109

City State Zip Code
 Macon GA 31202-0109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 0 6

Transaction ID: R1643163

Amount of Each Receipt this Period

1250.00

Check

B. Full Name (Last, First, Middle Initial)

Mr. Dennis A. Brumbaugh, LUTCF

Mailing Address 17 Conley Lane

City State Zip Code
 Elma WA 98541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: R1642429

Amount of Each Receipt this Period

42.50

Payroll Deduction

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

Mr. Timothy J. Brungardt, LUTCF

Mailing Address 314 N. 5th.

City State Zip Code
 Norfolk NE 68701-4093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641478

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

1317.50

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. George B. Bryce, CLU, ChFC

Mailing Address 2730 Ardon Ln

City State Zip Code
 Casper WY 82609-3902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642672

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. James A. Buchan, CLU, ChFC

Mailing Address 5716 W. Orlando Circle

City State Zip Code
 Broken Arrow OK 74011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.00

Date of Receipt

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

Transaction ID: R1642347

Amount of Each Receipt this Period

60.00

Payroll Deduction

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

Mr. Jaford D. Burgad, LUTC

Mailing Address 3842 N. 10th St.

City State Zip Code
 Fargo ND 58102-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1641438

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

132.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. William D. Burke, CLU, CFP(r)

Mailing Address 2216 Nelda Way

City State Zip Code
 Alamo CA 94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642122

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Eugene H. Burkett, LUTCF

Mailing Address PO Box 921

City State Zip Code
 Felton CA 95018-0921

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1643046

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Ms. Donna J. Burrill, CLU, ChFC,

Mailing Address P.O.BOX 143

City State Zip Code
 FORT COLLINS CO 80522-0143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

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

Transaction ID: R1642875

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

72.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mrs. Evelyn Butler, CLTC, LUTC

Mailing Address 10 Lincoln Ave.

City State Zip Code
 Vernon NJ 07462

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1641173

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Robert D. Buxbaum, CLU, ChFC

Mailing Address 4 Linwood Rd.

City State Zip Code
 Wellesley MA 02181-2519

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642307

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Joe D. Byars, CLU, LUTCF

Mailing Address 5916 Park Ave

City State Zip Code
 Fort Smith AR 72903-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1642004

Amount of Each Receipt this Period

25.20

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

71.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Ms. Amy K. Byrne

Mailing Address 419 N Shoreline Blvd

City State Zip Code
 Mountain View CA 94043-4605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642042

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. David D. Cameron, LUTCF

Mailing Address 1142 FAIRVIEW AVE.

City State Zip Code
 Rupert ID 83350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

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

Transaction ID: R1642816

Amount of Each Receipt this Period

30.00

Payroll Deduction

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

Mr. Christopher D. Campbell, CLU, ChFC

Mailing Address 2511 Brandon Road

City State Zip Code
 Upper Arlington OH 43221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1641687

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

97.50

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Daniel J. Carlberg, CLU, ChFC,

Mailing Address 9774 Katella Ave Suite 102

City State Zip Code
 Anaheim CA 92804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 3 / 2 0 0 6

Transaction ID: R1643139

Amount of Each Receipt this Period

250.00

Credit Card

Full Name (Last, First, Middle Initial)

B. Ms. Cecilia H. Carlton, LUTC

Mailing Address 257 Pineview Dr

City State Zip Code
 Hazlehurst MS 39083-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.50

Date of Receipt

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

Transaction ID: R1642213

Amount of Each Receipt this Period

27.50

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Ms. Kelli J. Carmichael, CLU, LUTC

Mailing Address 2914 S Coffman

City State Zip Code
 Casper WY 82604-4733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

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

Transaction ID: R1643027

Amount of Each Receipt this Period

22.50

Payroll Deduction

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)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Jeffrey P. Case, LUTCF

Mailing Address 1311 33rd Avenue S.W.

City State Zip Code
Minot ND 58701-7266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.40

Date of Receipt

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

Transaction ID: R1642101

Amount of Each Receipt this Period

27.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. James M. Cavasar

Mailing Address 6 Chapel Hill Court

City State Zip Code
Mansfield TX 76063-3318

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: R1639935

Amount of Each Receipt this Period

36.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Richard J. Chandik, MBA

Mailing Address 1332 Shorebird Ln

City State Zip Code
Carlsbad CA 92009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

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

Transaction ID: R1641658

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

105.50

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Anthony D. Chapman

Mailing Address 1360 Redmond Circ

City State Zip Code
Rome GA 30165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640049

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Ms. Queenie M. Chee, CLU, LUTCF

Mailing Address 833 Waika Place

City State Zip Code
Honolulu HI 96825-1061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641542

Amount of Each Receipt this Period

42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Kim L. Christenson

Mailing Address 180 SW Gibson Lane

City State Zip Code
Issaquah WA 98027-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

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

Transaction ID: R1641154

Amount of Each Receipt this Period

22.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

85.50

TOTAL This Period (last page this line number only)

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

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or each category of the
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James C. Clabusch
Mailing Address 11375 Fairway Dr

City State Zip Code
Roscommon MI 48653

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: R1642735

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Ms. Katharine F. Clark
Mailing Address 110 Cross Creek Circle

City State Zip Code
Macon GA 31210

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642012

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Clark, CLU, ChFC
Mailing Address 1603 22nd St Ste 202

City State Zip Code
West Des Moines IA 50266-1410

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1642616

Amount of Each Receipt this Period

60.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

127.50

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. J Michael Clinton

Mailing Address 3525 Tilford Cir

City State Zip Code
 Monroe LA 71201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

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

Transaction ID: R1639710

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Bud Clisby, LUTCF

Mailing Address 4353
 browning lane

City State Zip Code
 viera FL 32955

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641879

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Ms. Ernestine S. Cohn, CSA

Mailing Address 1773 139th Avenue

City State Zip Code
 San Leandro CA 94578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641022

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

84.50

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 30 / 175

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Gordon T. Colburn
Mailing Address 126 Crystal Springs Road

City State Zip Code
San Dimas CA 91773

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642415

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Norman A. Coltrane, LUTCF
Mailing Address 1607 Hatherleigh Drive

City State Zip Code
Fayetteville NC 28304-3643

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.50

Date of Receipt

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

Transaction ID: R1642723

Amount of Each Receipt this Period

30.25

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Frank J. Congilose, CLU, ChFC,
Mailing Address 2431 Atlantic Ave.

City State Zip Code
Manasquan NJ 08736

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1639088

Amount of Each Receipt this Period

600.00

Check

SUBTOTAL of Receipts This Page (optional)

672.75

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mrs. Melissa T. Copeland, LUTC

Mailing Address 236 Hobbs Landing Road

City State Zip Code
 Elizabeth City NC 27909

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

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

Transaction ID: R1639731

Amount of Each Receipt this Period

55.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Jonathan S. Corle, CLU

Mailing Address 102 Crimson Place

City State Zip Code
 Chester Springs PA 19425-2110

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 8 / 2 0 0 6

Transaction ID: R1643559

Amount of Each Receipt this Period

375.00

Check

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

Mr. David A. Culley, CLU, ChFC

Mailing Address 4187 Club Drive N.E.

City State Zip Code
 Atlanta GA 30319-1115

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1643072

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

472.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City State Zip Code
Tupelo MS 38801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.50

Date of Receipt

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

Transaction ID: R1642997

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona, CLU, ChFC

Mailing Address 141 Greenway Road

City State Zip Code
Lido Beach NY 11561-4828

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

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

Transaction ID: R1642745

Amount of Each Receipt this Period

85.00

Payroll Deduction

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

Mr. Steven M. Daniel, CLU, ChFC,

Mailing Address 2600 Meadowbrook Dr

City State Zip Code
Butte MT 59701-4028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1642777

Amount of Each Receipt this Period

25.20

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

160.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. William James DeBruin, LUTCF
Mailing Address 106 Edgewood Ln

City State Zip Code
Combined Locks WI 54113

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID: R1642290

Amount of Each Receipt this Period

72.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Jorge R. DeCubas, J.D., CLU
Mailing Address 115 Sunrise Dr #4-D

City State Zip Code
Key Biscayne FL 33149

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642402

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Troy D. DeLair, LUTCF
Mailing Address 841 E 3550 N

City State Zip Code
North Ogden UT 84414-7596

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642807

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

118.00

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 34 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Glenn P. Deal, Jr.

Mailing Address 58 Golf Course Ln.

City State Zip Code
Taylorsville NC 28681

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.50

Date of Receipt

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

Transaction ID: R1641927

Amount of Each Receipt this Period

27.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. John R. Dean, LUTCF, CLU,

Mailing Address 1700 S.W. 15th Ave.

City State Zip Code
Willmar MN 56201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.00

Date of Receipt

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

Transaction ID: R1643043

Amount of Each Receipt this Period

50.00

Payroll Deduction

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

Mr. Lawrence P. Decker, ChFC

Mailing Address 11944 Treat Hwy

City State Zip Code
Jasper MI 49248-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641744

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

102.50

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Paul R. Decker, CLU, ChFC

Mailing Address Box 1832

City State Zip Code
 Idaho Falls ID 83403-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642878

Amount of Each Receipt this Period

50.40

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Robert F. Decker, CLU, FLMI

Mailing Address 9290 West Dodge Road #102

City State Zip Code
 Omaha NE 68114-3320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: R1643428

Amount of Each Receipt this Period

150.00

Check

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

Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City State Zip Code
 Carmichael CA 95608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

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

Transaction ID: R1643019

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

242.40

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. David S. Dickenson, II, CLU, Ch

Mailing Address 7535 Brigham Road

City State Zip Code

Gates Mills OH 44040

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642506

Amount of Each Receipt this Period

42.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Kenneth H. Dinklage, CLU, ChFC

Mailing Address PO Box 533709

City State Zip Code

Orlando FL 32853-3709

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643538

Amount of Each Receipt this Period

250.00

Check

Full Name (Last, First, Middle Initial)

C. Mr. James J. Dinsmore, CLU, LUTCF

Mailing Address 104 Lehman Drive

City State Zip Code

Cogan Station PA 17728-9228

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641621

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

313.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Lyle Domenitz
Mailing Address 8720 Maggie Ave

City State Zip Code
Las Vegas NV 89143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1640015

Amount of Each Receipt this Period

50.40

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Ms. Rosa K. Dominy
Mailing Address 4015-J Washington Rd

City State Zip Code
Martinez GA 30907-5183

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

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

Transaction ID: R1641890

Amount of Each Receipt this Period

25.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Henry Donaghy, CLU, ChFC
Mailing Address 400 North Church Street
208

City State Zip Code
Charlotte NC 28202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: R1641566

Amount of Each Receipt this Period

23.10

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

99.00

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Robert V. Donovan, CLU, ChFC, C

Mailing Address PO Box 785

City State Zip Code
 Linville NC 28646-0785

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: R1639097

Amount of Each Receipt this Period

275.00

Check

Full Name (Last, First, Middle Initial)

B. Ms. Jill M. Douglass, LUTC

Mailing Address 1824 Villa Vista Way

City State Zip Code
 Las Vegas NV 89128-3053

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: R1641721

Amount of Each Receipt this Period

27.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. George M. Dudikoff, LUTC

Mailing Address 12897 Quail Hollow Dr

City State Zip Code
 Fairfield CA 94534

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641725

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

323.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Daniel D. Duren, CLU, ChFC, L

Mailing Address 6537 S. 34th Street

City State Zip Code
 Lincoln NE 68516-5428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: R1641539

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Thomas W. Dzik, CLU, ChFC

Mailing Address 530 Dodge Lane

City State Zip Code
 St. Paul MN 55118-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641475

Amount of Each Receipt this Period

25.00

Payroll Deduction

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

Mr. Robert Eddy, Jr., CLU, C

Mailing Address 203 Autumn Oak Bend

City State Zip Code
 Lafayette LA 70508-8004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642248

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Matthew Edelstein, CLU,ChFC
Mailing Address 1550 Penstemon Ct

City State Zip Code
Grayslake IL 60030-3515

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: R1639888

Amount of Each Receipt this Period

8.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Donald A. Eichelberger
Mailing Address 3217 Highway D65

City State Zip Code
Dysart IA 52224-9750

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1643040

Amount of Each Receipt this Period

50.40

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. M. Jay Einstein, CLU
Mailing Address 59 Margarete Dr.

City State Zip Code
Pittsgrove NJ 08318

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

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

Transaction ID: R1642478

Amount of Each Receipt this Period

72.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

130.90

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Howard J. Elias, LUTCF
Mailing Address 888 Seventh Ave., #301

City State Zip Code
New York NY 10106-0001

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643816

Amount of Each Receipt this Period

250.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mr. Shannon J. Enders
Mailing Address 2018 Oak Ave

City State Zip Code
N. Muskegon MI 49445-3140

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642332

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Ronald L. Engel, CLU, ChFC
Mailing Address 3397 St Helena Hwy N

City State Zip Code
St. Helena CA 94574-9660

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641221

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

292.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. A. Christopher Engle, LUTCF

Mailing Address 4485 Orchard Creek Ct S E

City State Zip Code
 Kentwood MI 49546

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: R1641248

Amount of Each Receipt this Period

25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Ronald W. Erickson, CLU, AEP,

Mailing Address 3002 St. Regis Rd

City State Zip Code
 Greensboro NC 27408-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.75

Date of Receipt

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

Transaction ID: R1642621

Amount of Each Receipt this Period

41.25

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City State Zip Code
 Boise ID 83706-5095

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642612

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

116.65

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Randy Eschels, CLU, ChFC, C

Mailing Address 5675 Winglake Rd.

City State Zip Code
 Bloomfield Hills MI 48301

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 3 / 2 0 0 6

Transaction ID: R1643615

Amount of Each Receipt this Period

250.00

Check

Full Name (Last, First, Middle Initial)

B. Mr. Stephen D. Estler, CLU, ChFC

Mailing Address 2177 NE 63 St.

City State Zip Code
 Fort Lauderdale FL 33308

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642635

Amount of Each Receipt this Period

42.50

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Robert E. Evans, CLU, ChFC,

Mailing Address 42 Willowbrook Road

City State Zip Code
 Holden MA 01520

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1643121

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

313.50

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 44 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. John Everett, LUTC

Mailing Address 531 Daniel

City State Zip Code
 Santa Maria CA 93454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641889

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Andre L. Faucher, CLU, ChFC

Mailing Address 46 Osprey Circle

City State Zip Code
 Palm Coast FL 32137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642505

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Lines Robert Ferguson, Jr.

Mailing Address 500 Virginia St E Ste 1100

City State Zip Code
 Charleston WV 25301-2151

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641354

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

88.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Gerald E. Ferrier, LUTCF, CTP
Mailing Address 4949 Samish Way
#5

City State Zip Code
Bellingham WA 98226-4812

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

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

Transaction ID: R1642909

Amount of Each Receipt this Period

12.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Samuel B. Fields, LUTCF
Mailing Address P. O. Box 1742

City State Zip Code
Tuscaloosa AL 35403-1742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642773

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Dennis R. Fiore, CLU, ChFC,
Mailing Address 33533 W. 12 Mile Road
Suite 295

City State Zip Code
Farmington Hills MI 48331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643290

Amount of Each Receipt this Period

250.00

Check

SUBTOTAL of Receipts This Page (optional)

283.50

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 46 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. John E. Fleming

Mailing Address 108 Stratford Court

City State Zip Code
Hollidaysburg PA 16648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643397

Amount of Each Receipt this Period

250.00

Credit Card

B. Full Name (Last, First, Middle Initial)

Mr. Thomas F. Flournoy, Jr., CLU

Mailing Address 2651 Stanislaus Circle

City State Zip Code
Macon GA 31204-2849

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642466

Amount of Each Receipt this Period

42.00

Payroll Deduction

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

Mr. John A. Forbing

Mailing Address 23209 Charwood PI

City State Zip Code
Diamond Bar CA 91765-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642201

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

313.00

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. H. Larry Fortenberry, CPA, CLU, Ch

Mailing Address 603 Gordon Pl

City State Zip Code
 Madison MS 39110-9799

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: R1642498

Amount of Each Receipt this Period

52.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Lawrence J. Fowler, Jr.

Mailing Address 481 Route 82

City State Zip Code
 Oakdale CT 06370-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

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

Transaction ID: R1642516

Amount of Each Receipt this Period

110.00

Payroll Deduction

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

Mr. Thomas E. Fowler, CLU, LUTCF

Mailing Address 13243 S.E. 51st Place

City State Zip Code
 Bellevue WA 98006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

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

Transaction ID: R1642288

Amount of Each Receipt this Period

107.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Joseph P. Fox

Mailing Address 1751 Upper 55th St, E.

City State Zip Code
 Inver Grove Height MN 55077

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 0 6

Transaction ID: R1643148

Amount of Each Receipt this Period

250.00

Check

B. Full Name (Last, First, Middle Initial)

Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City State Zip Code
 New York NY 10014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642739

Amount of Each Receipt this Period

42.00

Payroll Deduction

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

Mr. Robert P. Freed

Mailing Address 976 Landings Ct

City State Zip Code
 Westerville OH 43082-7429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: R1642502

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

313.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Robert L. French, LUTCF

Mailing Address 4105 Sheridan Lake Road

City State Zip Code
 Rapid City SD 57702

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

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 0 / 2 0 0 6

Transaction ID: R1642150

Amount of Each Receipt this Period

30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Donald A. Frost, PGA

Mailing Address 612 A N. Pageant Drive

City State Zip Code
 Orange CA 92869-2572

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641262

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Alan L. Fry, CLU, CFP,

Mailing Address 15112 Lima Road

City State Zip Code
 Huntertown IN 46748-9711

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642670

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

72.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Alan L. Fry, CLU, CFP,
Mailing Address 15112 Lima Road

City State Zip Code
Huntertown IN 46748-9711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1643393

Amount of Each Receipt this Period

68.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mrs. Kelli Park Fuhrmann
Mailing Address 415 S Henry St #11

City State Zip Code
Pierre SD 57501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID: R1639830

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Peter Fulchiron, CLU, LUTCF
Mailing Address 411 San Andreas Drive

City State Zip Code
Novato CA 94945-1237

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

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

Transaction ID: R1643111

Amount of Each Receipt this Period

208.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

301.00

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Donald T. Fulton, CLU, ChFC
Mailing Address 43 Bridleshire Road

City State Zip Code
Newark DE 19711-6217

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Transaction ID: R1643633

Amount of Each Receipt this Period

37.50

Check

B. Full Name (Last, First, Middle Initial)
Mr. Adger Lamar Gaines, LUTCF
Mailing Address 106 Smith Circle

City State Zip Code
Belton SC 29627

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: R1641606

Amount of Each Receipt this Period

10.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Jason M. Garman
Mailing Address 1103 Bear Cub Ct.

City State Zip Code
Henderson NV 89012

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1639868

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

97.90

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Roger W. Garrett

Mailing Address 2201 Woodlawn Road
P O Box 370

City State Zip Code
Lincoln IL 62656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642020

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Michael J. Gates, LUTCF

Mailing Address 94 Pine Glen Rd.

City State Zip Code
Langhorne PA 19047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641164

Amount of Each Receipt this Period

25.00

Payroll Deduction

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

Mr. James O. Geitgey, LUTCF, FIC

Mailing Address 279 Glenmore Dr.

City State Zip Code
Springfield OH 45503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID: R1642552

Amount of Each Receipt this Period

32.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

82.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Gregory Gianakis
Mailing Address 5315 S Conquistador St

City State Zip Code
Las Vegas NV 89148

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

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

Transaction ID: R1639618

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Joseph R. Giangola, CEBS
Mailing Address 1925 Pleasantview

City State Zip Code
Ashtabula OH 44004-9719

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

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

Transaction ID: R1642328

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Steven Dwayne Gifford
Mailing Address P.O. Box 308

City State Zip Code
Catlettsburg KY 41129

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

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

Transaction ID: R1641448

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

80.20

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Harold A. Gillet, LUTCF

Mailing Address 2402 Garland

City State Zip Code
 Missoula MT 59803-1437

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1642227

Amount of Each Receipt this Period

18.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Keith M. Gillies, CLU, ChFC,

Mailing Address 109 W. Lakeview Dr.

City State Zip Code
 La Place LA 70068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.75

Date of Receipt

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

Transaction ID: R1641999

Amount of Each Receipt this Period

50.00

Payroll Deduction

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

Constance Y. Golleher

Mailing Address PO Box 255

City State Zip Code
 Mc Lean VA 22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1639920

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

98.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. James W. Goodacre, II, RHU, RE

Mailing Address 10407 Fairway Lane

City State Zip Code
Carmel CA 93923-9311

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641804

Amount of Each Receipt this Period

21.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. James R. Goodrich, CLU, ChFC

Mailing Address 1860 Beech

City State Zip Code
Mt. Pleasant MI 48858-1280

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.50

Date of Receipt

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

Transaction ID: R1641291

Amount of Each Receipt this Period

42.50

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Kenneth A. Grace, CLU

Mailing Address 3472 Hidden Oakslane

City State Zip Code
West Bloomfield MI 48324

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

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 3 / 2 0 0 6

Transaction ID: R1643138

Amount of Each Receipt this Period

500.00

Credit Card

SUBTOTAL of Receipts This Page (optional)

563.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Frederick L. Granados, LUTCF, FSS

Mailing Address 1145 Davis Avenue

City State Zip Code
Concord CA 94518

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641984

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Todd G. Grantham

Mailing Address 203 Brandermill Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.50

Date of Receipt

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

Transaction ID: R1641297

Amount of Each Receipt this Period

46.75

Payroll Deduction

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

Mr. George F. Griffin, LUTCF, CLF

Mailing Address P.O. Box 31939 St. Andrews Br.

City State Zip Code
Charleston SC 29417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

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

Transaction ID: R1641013

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

92.75

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Angelo Assad Haddad
Mailing Address 354 Garnsey Ave

City State Zip Code
Bakersfield CA 93309

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642413

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Edwin R. Hamilton, CLU, LUTCF
Mailing Address 4318 Council Circle

City State Zip Code
Jackson MS 39206-5819

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642913

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Karl Erik Hansen, CLU, ChFC,
Mailing Address 900 North Shoreline Boulevard

City State Zip Code
Mountain View CA 94043-1933

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1643004

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

88.50

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Sharon L. Hansen

Mailing Address P. O. Box 2305
1224 Cleveland Street

City State Zip Code
Mt Vernon WA 98273-7305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: R1642297

Amount of Each Receipt this Period

27.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Alex Hanson, CLU, ChFC

Mailing Address 7888 Glen Finnan Cir

City State Zip Code
Ft Myers FL 33912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642972

Amount of Each Receipt this Period

42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. William N. Haraway

Mailing Address 2250 Bear Den Rd
Unit 409

City State Zip Code
Frederick MD 21701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1643023

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

111.50

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Linda S. Harris

Mailing Address PO Box 261669

City State Zip Code
San Diego CA 92196-1669

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641236

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Roger W. Hassler, LUTCF

Mailing Address 22593 Counrty View De

City State Zip Code
San Jose CA 95120-4510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641891

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Thomas M. Hawco, CLU, ChFC

Mailing Address 900 Rockhurst Drive

City State Zip Code
Lincoln NE 68510-4114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: R1642751

Amount of Each Receipt this Period

62.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

106.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Jonathan David Haymes, LUTCF

Mailing Address 708 n. Fairway

City State Zip Code
 Nixa MO 65714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1641838

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Samuel H. Hazleton, IV

Mailing Address 4220 Lakeshore Drive

City State Zip Code
 Diamond Point NY 12824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641306

Amount of Each Receipt this Period

42.00

Payroll Deduction

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

Mr. Terry K. Headley, LUTCF, LIC

Mailing Address 20704 Meadow Ridge Dr.

City State Zip Code
 Springfield NE 68059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

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

Transaction ID: R1641219

Amount of Each Receipt this Period

208.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

275.20

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Sharon G. Heierman, CAE

Mailing Address 2990 Kemp Rd

City State Zip Code
Havana FL 32333

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1639839

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Dennis L. Helgeson, CLU,ChFC,L

Mailing Address 2601 Bel Air Drive

City State Zip Code
Minot ND 58703-1749

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1641465

Amount of Each Receipt this Period

25.20

Payroll Deduction

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

Mr. Marcus T. Henderson, Sr.,LUTC

Mailing Address 109 Barrington Court East

City State Zip Code
Franklin TN 37067

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

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

Transaction ID: R1642701

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

109.20

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Michael C. Herring
Mailing Address 9550 N 150th Ct

City State Zip Code
Waverly NE 68462-1569

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641076

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Ronald G. Hester, CLU, ChFC
Mailing Address 261 New River Heights Rd.

City State Zip Code
Boone NC 28607

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.50

Date of Receipt

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

Transaction ID: R1642717

Amount of Each Receipt this Period

46.75

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Richard L. Hill, CLU, ChFC,
Mailing Address 2611 Alvo Road

City State Zip Code
Seward NE 68434

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1643031

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

111.25

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Michael J. Hiller, ChFC

Mailing Address W267 S7930 Stony Pt. Ct.

City State Zip Code
Mukwonago WI 53149-9687

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1641850

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Steven P. Hogg, CLU, ChFC

Mailing Address 1658 NE Sawdust Hill Rd.

City State Zip Code
Poulsbo WA 98370

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643014

Amount of Each Receipt this Period

25.00

Payroll Deduction

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

Mr. Jeff L. Holland, CLU, ChFC

Mailing Address 200 Matthew Drive

City State Zip Code
Paducah KY 42001-6162

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642868

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

80.20

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Robert J. Hollander, LUTCF

Mailing Address 904 Rockhurst Dr.

City State Zip Code
 Lincoln NE 68510-4114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: R1641741

Amount of Each Receipt this Period

105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Richard L. Hoover, LUTCF, RIA

Mailing Address 2920 S. Jones Blvd., #110

City State Zip Code
 Las Vegas NV 89146

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.40

Date of Receipt

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

Transaction ID: R1641703

Amount of Each Receipt this Period

60.00

Payroll Deduction

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

Mr. Darrel V. Hovde

Mailing Address PO Box 1806

City State Zip Code
 Minot ND 58702-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.60

Date of Receipt

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

Transaction ID: R1641068

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. April L. Howard
Mailing Address 3386 Williamsburg

City State Zip Code
Boise ID 83706-5320

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

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

Transaction ID: R1642232

Amount of Each Receipt this Period

57.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Peter K. Howard, LUTCF,ChFC
Mailing Address 326 Rosemary Lane

City State Zip Code
Danville VA 24541-4526

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: R1642119

Amount of Each Receipt this Period

15.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. William A. Hume, LUTCF
Mailing Address 1075 Woodfield Lane

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

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

Transaction ID: R1641095

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

114.50

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Albert T. Hurst, Jr., FICF, C
Mailing Address 1422 Spring Street

City State Zip Code
Little Rock AR 72202

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1641468

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Hollis O. Inglett, Jr., LUTCF
Mailing Address 31 Cone Rd

City State Zip Code
Ormond Beach FL 32174-7903

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642981

Amount of Each Receipt this Period

42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. William V. Irons, CLU, LUTCF
Mailing Address 325 Newman Ave

City State Zip Code
Rumford RI 02916-1255

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1642714

Amount of Each Receipt this Period

25.20

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

92.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Greg W. Jacobs

Mailing Address 1350 Grand Summitt Drive #116

City State Zip Code
Reno NV 89523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1639879

Amount of Each Receipt this Period

25.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Michael R. James

Mailing Address 107 Ingleside East Dr.

City State Zip Code
Madison MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641253

Amount of Each Receipt this Period

22.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Donald C. Jayne, CLU, ChFC

Mailing Address 20402 Tulsa Street

City State Zip Code
Chatsworth CA 91311-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642651

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

72.70

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Jerry E. Jensen, LUTCF
Mailing Address 190 So. 800 W.

City State Zip Code
Blackfoot ID 83221-6132

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

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

Transaction ID: R1641477

Amount of Each Receipt this Period

50.40

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Randall H. Jensen
Mailing Address 124 W 46th St., #201

City State Zip Code
Kearney NE 68847

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642285

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. John C. Johns, LUTCF
Mailing Address 5141 Lilly Rd.

City State Zip Code
Hazlehurst MS 39083

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: R1642215

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

101.40

TOTAL This Period (last page this line number only)

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

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or each category of the
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Larry G. Johnson, LUTCFS, CSA

Mailing Address 44466 Albert

City State Zip Code
Plymouth MI 48170

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

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

Transaction ID: R1639892

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City State Zip Code
Puunene HI 96784

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641036

Amount of Each Receipt this Period

25.00

Payroll Deduction

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

Mr. Terry M. Kaltenbach, CLU, ChFC

Mailing Address 1358 Ahlrich Ave

City State Zip Code
Encintas CA 92024-4029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: R1642317

Amount of Each Receipt this Period

125.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

172.50

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Bruce H. Kantor, CLU, LUTCF
Mailing Address 2901 Cross Country Rd

City State Zip Code
Charlotte NC 28270-0600

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: R1643022

Amount of Each Receipt this Period

23.10

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. John B. Kearns, LUTCF
Mailing Address 1802 First Ave

City State Zip Code
Scottsbluff NE 69361

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1641152

Amount of Each Receipt this Period

42.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. F. Nicholas Kelley, CLU
Mailing Address 5905 S. 151 Ave Circle

City State Zip Code
Omaha NE 68137

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641541

Amount of Each Receipt this Period

22.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

88.10

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Roy W. Kern, LUTCF, CLTC
Mailing Address 3775 West Randall Road

City State Zip Code
Springfield MO 65810

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

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

Transaction ID: R1642858

Amount of Each Receipt this Period

60.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Marvin R. Keys, LUTCF
Mailing Address 8785 Inverness Place

City State Zip Code
Tuscaloosa AL 35405

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1642959

Amount of Each Receipt this Period

22.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Thomas K. Kilton
Mailing Address 1933 E River Pkwy

City State Zip Code
Minneapolis 55408

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641115

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

103.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Ronald L. King
Mailing Address 3906 Wake Forest Rd

City State Zip Code
Raleigh NC 27609

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

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

Transaction ID: R1639867

Amount of Each Receipt this Period

24.75

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Lawrence L. Kitts, CLU,ChFC,R
Mailing Address 10842 Mount CurveRd

City State Zip Code
Eden Prairie MN 55347-2908

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642654

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. David G. Klemisch, LUTCF
Mailing Address 2801 26th Ave SW

City State Zip Code
Fargo ND 58103

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

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

Transaction ID: R1641697

Amount of Each Receipt this Period

51.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

96.75

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Casey C. Knake, CLU, ChFC

Mailing Address 2902 Mach I Dr.

City State Zip Code
 Norfolk NE 68701-3238

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641474

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Kenneth E. Knox, CLU, ChFC

Mailing Address Unit 9, 10 East St

City State Zip Code
 Providence RI 02906-3069

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642564

Amount of Each Receipt this Period

50.40

Payroll Deduction

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

Ms. Johanna Margaret-Mary Kockritz

Mailing Address 7864 Highlander Dr

City State Zip Code
 Anchorage AK 99518

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642980

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

117.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Lance B. Kolbet, RHU, LUTCF
Mailing Address 4632 Mountain Park Rd.

City State Zip Code
Pocatello ID 83202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.60

Date of Receipt

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

Transaction ID: R1642682

Amount of Each Receipt this Period

126.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. David M. Koll, LUTCF, CLT
Mailing Address 1612 S. 152nd Street

City State Zip Code
Omaha NE 68144-5121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

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

Transaction ID: R1642136

Amount of Each Receipt this Period

105.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Richard A. Koob, CLU, ChFC,
Mailing Address 301 Frederick Street

City State Zip Code
Waukesha WI 53186-8116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642357

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

281.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. David T. Koppa, CLU, LUTCF
Mailing Address 1105 Via Bolzano

City State Zip Code
Santa Barbara CA 93111

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642113

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Ronald F. Kramer, LUTCF
Mailing Address P. O. Box 26

City State Zip Code
Pierce NE 68767-0026

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642559

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Ben Kronish, CLU, ChFC
Mailing Address 205 W 89th St #2H

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642509

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

88.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Jon P. Kubler, LUTCF

Mailing Address 1620 N. 127th St

City State Zip Code
Omaha NE 68154-3637

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1641442

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Gary M. Lane, CLU

Mailing Address 925 Highland Terrance NE

City State Zip Code
Atlanta GA 30306

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1643095

Amount of Each Receipt this Period

22.50

Payroll Deduction

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

Mr. Thomas R. Laster, RHU

Mailing Address 1713 Elmhurst Ave

City State Zip Code
Nichols Hills OK 73120

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642978

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

95.40

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Monica J. Lawfield, CMFC
Mailing Address 6851 Caballero Dr.

City State Zip Code
Jacksonville FL 32217

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1639882

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Lawrence
Mailing Address 5553 Peters Drive

City State Zip Code
West Bend WI 53095

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

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

Transaction ID: R1641473

Amount of Each Receipt this Period

51.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Robert Terry Lawson, LUTCF, CSA
Mailing Address 212 E Pine Grove Ave

City State Zip Code
North Augusta SC 29841-3854

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1643262

Amount of Each Receipt this Period

50.00

Check

SUBTOTAL of Receipts This Page (optional)

122.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Frank Lazarus, CLU, ChFC, C

Mailing Address 2 Bala Plaza, Suite 901

City State Zip Code
 Bala Cynwyd PA 19004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 6 / 2 0 0 6

Transaction ID: R1643497

Amount of Each Receipt this Period

150.00

Credit Card

B. Full Name (Last, First, Middle Initial)

Mr. Leslie W. Lee, CLU, ChFC

Mailing Address 7522 E Hampstead Ct.

City State Zip Code
 Middleton WI 53562

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1643044

Amount of Each Receipt this Period

25.20

Payroll Deduction

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

Mr. Lanny D. Levin, CLU, ChFC

Mailing Address 313 Laurel

City State Zip Code
 Highland Park IL 60035-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642736

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

217.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 79 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Bruce C. Lichtenberg, LUTCF

Mailing Address 2265 Cypress Point

City State Zip Code
Discovery Bay CA 94514

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.00

Date of Receipt

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

Transaction ID: R1643005

Amount of Each Receipt this Period

50.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Ms. Carolyn Lloyd-Cohen, CLU, ChFC

Mailing Address 72B Dwright Place

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643556

Amount of Each Receipt this Period

250.00

Check

Full Name (Last, First, Middle Initial)

C. Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City State Zip Code
Flint MI 48532

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: R1643070

Amount of Each Receipt this Period

105.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

405.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 80 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Archie F. Lowe, CLU

Mailing Address 38 Old Ivy Road, Suite 200

City State Zip Code
 Atlanta GA 30342

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641549

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. R. Art Lubomski, CLU

Mailing Address 4137 Beech Ave

City State Zip Code
 Erie PA 16508-3118

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642675

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mrs. Patricia S. Lucas, CLU,CLTC,L

Mailing Address 8375 Starlight Lane

City State Zip Code
 Boones Mill VA 24065-1909

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641894

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 175

(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)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. William J. Lynch, LUTCF

Mailing Address 5075 SW Griffith Dr. #200

City State Zip Code
Beaverton OR 97005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 0 | | 2 | 0 | 0 | 6 |

Transaction ID: R1642799

Amount of Each Receipt this Period

37.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. J. Peter Lyons, CLU, ChFC,

Mailing Address 54 Cranmore Road

City State Zip Code
Wellesley MA 02181-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

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 | 3 | | 2 | 0 | 0 | 6 |

Transaction ID: R1643610

Amount of Each Receipt this Period

500.00

Check

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

Mailing Address 1931 N 73rd St.

City State Zip Code
Wauwatosa WI 53213

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 0 | | 2 | 0 | 0 | 6 |

Transaction ID: R1642070

Amount of Each Receipt this Period

27.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

564.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Dean G. Macheras, LUTCF

Mailing Address 61 Oakwood Dr

City State Zip Code
Monroe LA 71203-2776

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 2 / 2 0 0 6

Transaction ID: R1643398

Amount of Each Receipt this Period

500.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mr. Glenford B. Malcolm, Sr.

Mailing Address P. O. Box 822315

City State Zip Code
South Florida FL 33082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1643082

Amount of Each Receipt this Period

42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Joseph J. Maltese, CFP

Mailing Address 4176 Arikakee Court

City State Zip Code
Jacksonville FL 32223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641636

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

584.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 83 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Dale F. Mamele, CLU
Mailing Address 111 Old Home Pl.

City State Zip Code
Columbia SC 29212-2051

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642156

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Steven R. Markham, LUTCF
Mailing Address 4 Alae St.

City State Zip Code
Hilo HI 96720

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1642164

Amount of Each Receipt this Period

12.50

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Claude A. Marlowe, Jr., LUTCF
Mailing Address 1101 Radcliffe Avenue

City State Zip Code
Kingsport TN 37664-2025

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642919

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

58.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 84 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Leonard Martin, CSA
Mailing Address 98 Tennyson Rd

City State Zip Code
Warwick RI 02888

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642062

Amount of Each Receipt this Period

50.40

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Roosevelt Maske, LUTCF
Mailing Address 5515 Fairvista Drive

City State Zip Code
Charlotte NC 28269-0633

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.90

Date of Receipt

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

Transaction ID: R1642153

Amount of Each Receipt this Period

46.20

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Darren Scott Mason, CLU, ChFC
Mailing Address 178 Shorecliff Rd

City State Zip Code
Corona Del Mar CA 92625-2648

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

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

Transaction ID: R1642554

Amount of Each Receipt this Period

41.66

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

138.26

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Curtis L. Matlin, CLU

Mailing Address 707 Skokie Blvd. #700

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1641415

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Carl James Maus, LUTC

Mailing Address 432 Fort Saratoga

City State Zip Code
 Saint Charles MO 63303-1766

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1643038

Amount of Each Receipt this Period

50.40

Payroll Deduction

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

Mr. Michael V. May, CLU, ChFC,

Mailing Address P O Box 910

City State Zip Code
 Port Richey FL 34673-0910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

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

Transaction ID: R1641427

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

96.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City State Zip Code
 West Monroe LA 71291

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

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

Transaction ID: R1641348

Amount of Each Receipt this Period

50.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mrs. Joyce G. McDonald, CLU

Mailing Address 1330 Hagood Ave

City State Zip Code
 Columbia SC 29205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642008

Amount of Each Receipt this Period

21.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Clyde P. McFadden, LUTCF

Mailing Address 3401 West End Ave.
 Ste. 650 W

City State Zip Code
 Nashville TN 37203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1641240

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Juli Y. McNeely, LUTCf,CFP
Mailing Address S764 Hanson Road

City State Zip Code
Spencer WI 54479

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: R1641957

Amount of Each Receipt this Period

30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Thomas D. McNeil
Mailing Address 49 Hagen Oaks Ct

City State Zip Code
Alamo CA 94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642006

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Carl F. Mehlhop, CLU, ChFC
Mailing Address 89 Van Ripper Ln

City State Zip Code
Orinda CA 94563-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642343

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

76.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

| | | | | |
|---|--|-------------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Mr. Dennis R. Merideth, CLU, ChFC | | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 6210 N. Camino Pimeria Alta | | | Transaction ID: R1642283 | |
| City State Zip Code Tucson AZ 85718 | | | Amount of Each Receipt this Period 66.00 | |
| FEC ID number of contributing federal political committee. C | | | Payroll Deduction | |
| Name of Employer Self-employed | | Occupation Insurance Agent | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 660.00 | | |
| B. Full Name (Last, First, Middle Initial) Mr. David A. Middaugh, CLU, AEP | | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 3273 Evergreen Road | | | Transaction ID: R1643036 | |
| City State Zip Code Fargo ND 58102-1214 | | | Amount of Each Receipt this Period 126.00 | |
| FEC ID number of contributing federal political committee. C | | | Payroll Deduction | |
| Name of Employer Self-employed | | Occupation Insurance Agent | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1098.00 | | |
| C. Full Name (Last, First, Middle Initial) Mr. Carl W. Middleton, III, CLU Ch | | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 8500 Gordon Dr NE | | | Transaction ID: R1641300 | |
| City State Zip Code Bain Bridge Is. WA 98110-3003 | | | Amount of Each Receipt this Period 21.00 | |
| FEC ID number of contributing federal political committee. C | | | Payroll Deduction | |
| Name of Employer Self-employed | | Occupation Insurance Agent | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 210.00 | | |

SUBTOTAL of Receipts This Page (optional)

213.00

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

| | | |
|--|--|--|
| A. Full Name (Last, First, Middle Initial) Mrs. Krisann K. Miehe Mailing Address 2519 Galahad Way City Janesville State WI Zip Code 53548 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00 | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: R1643463 Amount of Each Receipt this Period 300.00 Check |
| B. Full Name (Last, First, Middle Initial) Mr. Michael J. Milburn, LUTCF Mailing Address 2332 Flagstaff Dr. City Longmont State CO Zip Code 80501 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00 | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: R1641449 Amount of Each Receipt this Period 22.50 Payroll Deduction |
| C. Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman State MI Zip Code 48893-9791 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.50 | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: R1641883 Amount of Each Receipt this Period 21.00 Payroll Deduction |

SUBTOTAL of Receipts This Page (optional)

343.50

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Dennis L. Miller, LUTCF, CLU

Mailing Address 649 State Road
P.O. Box 186

City State Zip Code
Vassar MI 48768

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1641730

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. James E. Miller, CLU, LUTCF

Mailing Address 1550 Faraday Circle

City State Zip Code
Fort Collins CO 80525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1639893

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Herbert F. Mischke, CLU, ChFC

Mailing Address 322 East County Road D

City State Zip Code
Little Canada MN 55117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642818

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

84.50

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Dianne C. Mitchell
Mailing Address 2209 Ontario Street

City State Zip Code
Bellingham WA 98226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640051

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. James E. Mitchell, LUTCF, CTP
Mailing Address 2209 Ontario

City State Zip Code
Bellingham WA 98226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1640815

Amount of Each Receipt this Period

60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Martin Montefel, CLU
Mailing Address 16932 SW 5th Way

City State Zip Code
Weston FL 33326-1564

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1642677

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James W. Monteverde

Mailing Address WaterWorks Road

City State Zip Code
Sewickley PA 15143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1643100

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. George E. Moore

Mailing Address 516 Woodland Hills

City State Zip Code
Carthage MS 39051-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640300

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Robert J. Morales, LUTCF, CLT

Mailing Address 1125 Wyoming Avenue

City State Zip Code
Reno NV 89503-3342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1640710

Amount of Each Receipt this Period

60.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Raymond H. Moran, CLU, ChFC
Mailing Address 5463 Irvin Park Cove

City State Zip Code
Memphis TN 38119

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642862

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr Joseph L Morton, III, JD
Mailing Address 5487 N. Bach

City State Zip Code
Meridian ID 83642

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

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

Transaction ID: R1639783

Amount of Each Receipt this Period

126.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. John P. Mosley, CLU, ChFC,
Mailing Address 307 Deering Avenue

City State Zip Code
Portland ME 04103-4856

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.36

Date of Receipt

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

Transaction ID: R1640463

Amount of Each Receipt this Period

23.04

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

191.04

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael G. Murphy

Mailing Address 1014 S. 54th St.

City State Zip Code
 Omaha NE 68106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: R1640800

Amount of Each Receipt this Period

28.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Robert M. Nelson, CLU, LUTCF

Mailing Address 14712 Shirley Street

City State Zip Code
 Omaha NE 68144-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

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 6

Transaction ID: R1643041

Amount of Each Receipt this Period

50.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. John F. Nichols, CLU, DIA

Mailing Address 1331 W Norwood Avenue

City State Zip Code
 Chicago IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

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

Transaction ID: R1640574

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

120.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Shirley A. Nielsen, LUTCF, CLU
Mailing Address 2817 Circle Drive

City State Zip Code
Grand Island NE 68801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1643033

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Stephen D. Noblin, CLU, ChFC, L
Mailing Address 128 dogwood Lane

City State Zip Code
Cowpens SC 29330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640389

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Frank R. Nolim, CLU, ChFC,
Mailing Address 2017 Grafton Ave

City State Zip Code
Henderson NV 89014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1642952

Amount of Each Receipt this Period

60.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

131.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Brian E. O'Brien, CLU, ChFC, L

Mailing Address 1651 Wolf Run Dr.

City State Zip Code
 Richfield WI 53076

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

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

Transaction ID: R1640356

Amount of Each Receipt this Period

51.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. James W. Oglesby, LUTCF

Mailing Address P. O. Box 7156

City State Zip Code
 Asheville NC 28802-7156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1705.00

Date of Receipt

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

Transaction ID: R1642873

Amount of Each Receipt this Period

143.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Ms. Martha N. Olmstead, CLU, ChFC

Mailing Address 56 Divisadero St

City State Zip Code
 San Francisco CA 94117-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640437

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

219.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Rae Lee Olson
Mailing Address 218 N El Monte Ave

City State Zip Code
Los Altos CA 94022-2354

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1643013

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Mitchell W. Ostrove, CLU, ChFC
Mailing Address 4 New King Street

City State Zip Code
White Plains NY 10604-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642140

Amount of Each Receipt this Period

42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Todd A. Otto
Mailing Address 945 Senior Ave

City State Zip Code
Dickinson ND 58601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

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

Transaction ID: R1640289

Amount of Each Receipt this Period

25.20

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

109.70

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Gary M. Owens, LUTCF

Mailing Address PO Box 835

City State Zip Code
 Sultan WA 98294

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

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

Transaction ID: R1640768

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Roger L. Owens, LUTCF, RHU

Mailing Address 51 Lance Ct

City State Zip Code
 Elkton MD 21921-7219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.50

Date of Receipt

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

Transaction ID: R1640711

Amount of Each Receipt this Period

42.00

Payroll Deduction

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

Mr. Aldous Kawaiiani Paalani

Mailing Address 2219 Kaululaau Street

City State Zip Code
 Honolulu HI 96813-1230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1642406

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

134.50

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. John Palladino, Jr., CLU, C

Mailing Address 14670 Quito Rd

City State Zip Code
Saratoga CA 95070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

10 / 10 / 2006

Transaction ID: R1640909

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Joseph S. Pantozzi, CLU, ChFC

Mailing Address PO Box 95063

City State Zip Code
Las Vegas NV 89193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 10 / 2006

Transaction ID: R1642644

Amount of Each Receipt this Period

60.00

Payroll Deduction

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

Ms. Cheryl R. Parker, CLU, ChFC,

Mailing Address 4120 Rainbow Drive

City State Zip Code
Virginia Beach VA 23456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

10 / 10 / 2006

Transaction ID: R1640330

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

127.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. John C. Parker, RHU, LTCP

Mailing Address 47 Laurel Hill Drive

City State Zip Code
 Niantic CT 06357-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

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

Transaction ID: R1643102

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Clinton J. Parks

Mailing Address 4848 Rivervale St Rt

City State Zip Code
 Soquel CA 95073-9727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1640910

Amount of Each Receipt this Period

22.50

Payroll Deduction

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

Mr. Barton C. Pasco, CLU, ChFC,

Mailing Address 309 Running Cedar Lane

City State Zip Code
 Richmond VA 23229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

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

Transaction ID: R1642707

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

97.50

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Debbie K. Paul, CLU, ChFC

Mailing Address 4001 MacArthur Blvd Suite 300

City State Zip Code
 Newport Beach CA 92660-2510

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642557

Amount of Each Receipt this Period

42.50

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Gary H. Pendleton, CLU, ChFC

Mailing Address 2601 Oberlin Rd

City State Zip Code
 Raleigh NC 27608-1319

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.30

Date of Receipt

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

Transaction ID: R1642278

Amount of Each Receipt this Period

45.83

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Henry J. Pfleger, Jr., CLU

Mailing Address 520 Hardee Rd.

City State Zip Code
 Coral Gables FL 33146

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1639110

Amount of Each Receipt this Period

500.00

Check

SUBTOTAL of Receipts This Page (optional)

588.33

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Brian R. Phares, LIC
Mailing Address 1420 Hackberry Road

City State Zip Code
North Platte NE 69101-6841

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: R1643030

Amount of Each Receipt this Period

47.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. A. Duer Pierce, Jr.
Mailing Address 5818 Kennett Pike

City State Zip Code
Wilmington DE 19807-1116

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: R1640775

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mrs. Cyndy M. Pierson
Mailing Address 13800 Vista Dorado

City State Zip Code
Salinas CA 93908-9443

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640533

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

93.50

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. R. Jan Pinney, CLU, ChFC,

Mailing Address 5152 Ellington Court

City State Zip Code
 Granite Bay CA 95746-7188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

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

Transaction ID: R1642147

Amount of Each Receipt this Period

208.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. James D.C. Pirkle

Mailing Address 395 Del Monte Ctr Suite 202

City State Zip Code
 Monterey CA 93940

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640461

Amount of Each Receipt this Period

25.00

Payroll Deduction

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

Mr. Joseph E. Pittman

Mailing Address 7430 Vinton Street

City State Zip Code
 Omaha NE 68124

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640959

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

254.00

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. William Poe, Jr., CLU
Mailing Address 2397 Samuelson Rd

City State Zip Code
Portage IN 46368-2531

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640686

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Charles W. Potts, CLU, RHU,
Mailing Address 12725 St. Andrews Ter

City State Zip Code
Oklahoma City OK 73120-8807

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642618

Amount of Each Receipt this Period

30.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Bradley W. Pratt, CLU, LUTCF
Mailing Address 2118 Peregrine Lane

City State Zip Code
Mankato MN 56003

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640899

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Laurene B. Prevette, LUTCF, RHU

Mailing Address 741 Romany Road

City State Zip Code
Charlotte NC 28203-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

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

Transaction ID: R1643090

Amount of Each Receipt this Period

27.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Henry L Prien, CLU, LUTCF

Mailing Address 1121 Westrac Dr. Ste. 206

City State Zip Code
Fargo ND 58103-2385

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.00

Date of Receipt

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

Transaction ID: R1642925

Amount of Each Receipt this Period

51.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Randall S. Prout

Mailing Address 651 W 9th St

City State Zip Code
Claremont CA 91711-3742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640268

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

99.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 106 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Barry K. Rake, LUTCF
Mailing Address 1004 Dawne Drive

City State Zip Code
Williamsport PA 17701

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1642882

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Edward F. Randolph
Mailing Address 1515 Mill Bay Road

City State Zip Code
Kodiak AK 99615-6233

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1640272

Amount of Each Receipt this Period

42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Ms. Jeri L. Regan, CLU, ChFC,
Mailing Address 2616 No. 100th Avenue

City State Zip Code
Omaha NE 68134-5510

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1641540

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

92.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Robert W. Rensing, LUTCF
Mailing Address 2515 S. 105th Ave

City State Zip Code
Omaha NE 68124-1825

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1640838

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Scott H. Richards, CLU ChFC
Mailing Address 603 Lake St. #304

City State Zip Code
Excelsior MN 55331-1949

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.50

Date of Receipt

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

Transaction ID: R1640541

Amount of Each Receipt this Period

4.25

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. August P. Richter, IV, LUTCF,
Mailing Address 401 Wild Oak Drive

City State Zip Code
Manitowoc WI 54220-9054

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1640425

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

96.65

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

| | | |
|---|--|--|
| A. Full Name (Last, First, Middle Initial) Mr. William E. Riley Mailing Address 715 N. Washington Blvd., Suite D City State Zip Code Sarasota FL 34236 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00 | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: R1640746 Amount of Each Receipt this Period 25.00 Payroll Deduction |
| B. Full Name (Last, First, Middle Initial) Mr. Adi Ringer, LUTCF, CFP Mailing Address 888 Vista Brisa City State Zip Code San Luis Obispo CA 93405 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00 | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: R1639938 Amount of Each Receipt this Period 22.50 Payroll Deduction |
| C. Full Name (Last, First, Middle Initial) Mr. Richard R. Rios, CLU, ChFC Mailing Address 8720 El Chapul Way City State Zip Code Fair Oaks CA 95628-5454 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 Transaction ID: R1640240 Amount of Each Receipt this Period 50.00 Payroll Deduction |

SUBTOTAL of Receipts This Page (optional)

97.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Robert M. Roach, CLU, ChFC

Mailing Address 1287 Harrison Pond Drive

City State Zip Code
 New Albany OH 43054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

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

Transaction ID: R1642362

Amount of Each Receipt this Period

117.50

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Harry S. Rosnick, LUTCF

Mailing Address 3435 Jefferson Davis Hwy
 P.O. Box 360

City State Zip Code
 Fredericksburg VA 22404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: R1640207

Amount of Each Receipt this Period

25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Eric S. Roth, LUTCF

Mailing Address 2 McKinley Ct.

City State Zip Code
 Monroe Twp. NJ 08831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642820

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

163.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. Shelley M. Rowe, LUTCF
Mailing Address 5908 E. Conservation Dr.

City State Zip Code
Longmont CO 80504

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: R1640654

Amount of Each Receipt this Period

37.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. William L. Rudd, LUTCF
Mailing Address 3150 Mollifield Lane

City State Zip Code
Charlottesville VA 22911

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID: R1643269

Amount of Each Receipt this Period

150.00

Check

C. Full Name (Last, First, Middle Initial)
Ms. Sherri A. Rush, LUTCF
Mailing Address 2140 Jefferson St Suite C

City State Zip Code
Napa CA 94559

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640875

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

212.50

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. D. David Russell
Mailing Address 8461 Eagle Preserve Way

City State Zip Code
Sarasota FL 34241-9449

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1640346

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Rust, LUTCF
Mailing Address 114 W. Arnold

City State Zip Code
Bozeman MT 59715-6129

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

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

Transaction ID: R1642185

Amount of Each Receipt this Period

60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Michael P. Saunders, CLU
Mailing Address 4185 Venetia Blvd

City State Zip Code
Jacksonville FL 32210-8505

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640685

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

131.00

TOTAL This Period (last page this line number only)

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

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or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Gregory B. Schaeffer

Mailing Address 3627 - 22nd St.

City State Zip Code
 Kenosha WI 53144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: R1640504

Amount of Each Receipt this Period

27.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Walter M. Schieffer, Jr., LUTCF

Mailing Address 17501 John Wayne

City State Zip Code
 Perry OK 73077-9513

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1640736

Amount of Each Receipt this Period

25.20

Payroll Deduction

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

Mr. Daniel J. Scholz, CLU, ChFC

Mailing Address 1510 So. 183 Circle

City State Zip Code
 Omaha NE 68130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.50

Date of Receipt

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

Transaction ID: R1642885

Amount of Each Receipt this Period

62.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

114.70

TOTAL This Period (last page this line number only)

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

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(check only one)

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Mark B. Schwendeman

Mailing Address 427 4th St

City State Zip Code
 Marietta OH 45750-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1643079

Amount of Each Receipt this Period

30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Walter J. Scott, CLU

Mailing Address 1022 WASHINGTON AVE.

City State Zip Code
 OSHKOSH WI 54901-5354

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1642309

Amount of Each Receipt this Period

50.40

Payroll Deduction

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

Mr. Randy L. Scritchfield, CFP, LUTCF

Mailing Address 10105 Nightingale St.

City State Zip Code
 Gaithersburg MD 20882-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1643105

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

101.40

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Harry E. Sechman

Mailing Address 13 Beechwood Dr

City State Zip Code
 Rutland MA 01543-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

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

Transaction ID: R1640747

Amount of Each Receipt this Period

30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Ms. Teresa L. Seefeldt, RHU

Mailing Address 643 Gaelic Court

City State Zip Code
 Apopka FL 32712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642293

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Dale J. Seymour

Mailing Address 2401 Wealdstone Rd.

City State Zip Code
 Toledo OH 43617

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: R1642632

Amount of Each Receipt this Period

10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

61.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James P. Shaheen, LUTCF

Mailing Address 3939 Linden Ave

City State Zip Code
Long Beach FL 90807-2714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640295

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. James A. Shalek, Jr., CLU, Ch

Mailing Address 1706 Candleberry Lane

City State Zip Code
Yorkville IL 60560-5810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1640352

Amount of Each Receipt this Period

25.00

Payroll Deduction

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

Mr. Troy J. Shreve, CLU

Mailing Address 7100 S 45th Street

City State Zip Code
Lincoln NE 68516-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642495

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

88.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. James John Silbernagel, LUTCF

Mailing Address W 2329 Capital Drive

City State Zip Code
 Campbellsport WI 53010-3010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: R1640923

Amount of Each Receipt this Period

60.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Joseph J. Simon, LUTCF

Mailing Address 2509 HILLSIDE DR.

City State Zip Code
 GREENBAY WI 54302-4828

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: R1640895

Amount of Each Receipt this Period

27.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Alan F. Simonis, Jr., LUTCF

Mailing Address P. O. Box 1858

City State Zip Code
 Huntsville AL 35807-0858

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640342

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

108.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Ken Simons, CLU, ChFC,
Mailing Address 808 Thoroughbred Lane

City State Zip Code
Artesia NM 88210-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

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

Transaction ID: R1642403

Amount of Each Receipt this Period

50.10

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Frank E. Skaw
Mailing Address 18821 E. Crestwood Lane

City State Zip Code
Otis Orchards WA 99027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642782

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. C. Phillip Smelley, CIC, LUTCF
Mailing Address 594 Gingercake Rd

City State Zip Code
Fayetteville GA 30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1643086

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

92.10

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Ms. Debra N. Smith

Mailing Address 1345 Cedar Park Pl

City State Zip Code
 Stone Mountain GA 30083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640921

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City State Zip Code
 Canyon Lake CA 92587-7831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2130.00

Date of Receipt

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

Transaction ID: R1642211

Amount of Each Receipt this Period

208.00

Payroll Deduction

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

Mr. David E. Smithkey, CLU, RFC

Mailing Address 9451 Heddy Drive

City State Zip Code
 Flushing MI 48433

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1256.00

Date of Receipt

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

Transaction ID: R1642229

Amount of Each Receipt this Period

208.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

441.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Lawrence Edward Sneed, CLU

Mailing Address 5005 Woodminster

City State Zip Code
Oakland CA 94601

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642179

Amount of Each Receipt this Period

21.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Mark V. Snider, ChFC

Mailing Address 44 Elmwood Place

City State Zip Code
Athens OH 45701-1904

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642737

Amount of Each Receipt this Period

42.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Ms. Sharon L. Sparling, CIC

Mailing Address 1100 E. College Way

City State Zip Code
Mount Vernon WA 98273

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: R1640971

Amount of Each Receipt this Period

45.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

108.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Donald P. Speakman

Mailing Address Two Penn Center West
Suite 325

City State Zip Code
Pittsburgh PA 15276-0102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6 / 2 0 0 6

Transaction ID: R1643202

Amount of Each Receipt this Period

500.00

Check

B. Full Name (Last, First, Middle Initial)

Mr. Preston R. Speece, LUTCF

Mailing Address 14620 Fowler Ave

City State Zip Code
Omaha NE 68116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.50

Date of Receipt

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

Transaction ID: R1640320

Amount of Each Receipt this Period

30.00

Payroll Deduction

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

Mr. Noel Courtney Spencer

Mailing Address 3 Valerie Drive

City State Zip Code
Chester NY 10918-1428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.50

Date of Receipt

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

Transaction ID: R1640310

Amount of Each Receipt this Period

104.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

634.50

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Walter C. Sprye, Jr., CLU, C

Mailing Address 101 Stoney Brook Rd.

City State Zip Code
 Rocky Mount NC 27804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

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

Transaction ID: R1642835

Amount of Each Receipt this Period

46.20

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Lawrence Stack, CLU, ChFC

Mailing Address 28411 Northwestern Hwy Ste 1300

City State Zip Code
 Southfield MI 48034-5543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: R1642254

Amount of Each Receipt this Period

50.00

Payroll Deduction

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

Mr. Ronald T. Staebell

Mailing Address 4309 Town Park Pl.

City State Zip Code
 Sioux Falls SD 57105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642817

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

117.20

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Angelo T. Stath
Mailing Address 7821 Massachusetts

City State Zip Code
Merrville IN 46410-5531

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: R1643075

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. John P. Steele, LUTCF
Mailing Address 122 West Main

City State Zip Code
Manhattan MT 59741

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1640465

Amount of Each Receipt this Period

30.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Jerry Lynn Stephens, LUTCF
Mailing Address 130 Tarheel Rd

City State Zip Code
Lumberton NC 28358

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: R1640387

Amount of Each Receipt this Period

23.10

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

103.10

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Pierce Allen Stevens, Jr.

Mailing Address P O Box 119

City State Zip Code
Anquilla MS 38721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 10 / 2006

Transaction ID: R1640634

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Nicholas John Stosic

Mailing Address 9820 Dixon Lane

City State Zip Code
Reno NV 89511-9455

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

10 / 10 / 2006

Transaction ID: R1642793

Amount of Each Receipt this Period

126.00

Payroll Deduction

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

Mr. David L. Stratton, CLU, ChFC,

Mailing Address 13115 Beach Cir.

City State Zip Code
Anchorage AK 99515-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

10 / 10 / 2006

Transaction ID: R1642665

Amount of Each Receipt this Period

105.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

256.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Steven M. Stratton, LUTCF, CSA

Mailing Address 17131 Parkview Dr

City State Zip Code
Morgan Hill CA 95037-6606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: R1640692

Amount of Each Receipt this Period

105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Michael W. Struebing, LUTCF, CLU

Mailing Address 16112 Parker Street

City State Zip Code
Omaha NE 68118-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.50

Date of Receipt

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

Transaction ID: R1640313

Amount of Each Receipt this Period

42.50

Payroll Deduction

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

Mr. Robert A. Styrkiewicz, CLU, LUTCF

Mailing Address 25 Monterey Drive

City State Zip Code
Vernon Hills IL 60061-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

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

Transaction ID: R1640844

Amount of Each Receipt this Period

56.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

204.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Robert R. Styrkiewicz

Mailing Address 2001 W. Warner Unit 1

City State Zip Code
 Chicago IL 60618

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1639788

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Mark Phelan Sudderberg

Mailing Address 1751 Clinton St.

City State Zip Code
 Rockford IL 61103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640484

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Stephen G. Summerlin, CFP

Mailing Address 4014 N. W. 15th Street

City State Zip Code
 Gainesville FL 32605-1912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642726

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

85.50

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Dennis P. Sunderman, CSA

Mailing Address 2325 Jeans Ct

City State Zip Code
Signal Hill CA 90755

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

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

Transaction ID: R1640579

Amount of Each Receipt this Period

105.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Arthur Ivan Swanson, LUTCF

Mailing Address 2270 E. 24TH PL

City State Zip Code
YUMA AZ 85365-3245

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1642479

Amount of Each Receipt this Period

25.20

Payroll Deduction

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

Mr. Elwood B. Syverson, LUTCF

Mailing Address 509 Loomis Drive

City State Zip Code
Mauston WI 53948-1522

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

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

Transaction ID: R1642805

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

160.20

TOTAL This Period (last page this line number only)

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Joseph A. Sztapka
Mailing Address 3705 S. Judy Ave

City State Zip Code
Sioux Falls SD 57103-7248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

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

Transaction ID: R1640539

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey J. Taggart
Mailing Address 1107 Cedar Ln.
P.O. Box 2433

City State Zip Code
Cody WY 82414-2433

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

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

Transaction ID: R1642757

Amount of Each Receipt this Period

50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Matthew S. Tassey
Mailing Address 5 Reggio Ave.

City State Zip Code
Old Orchard Beach ME 04064-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

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

Transaction ID: R1643122

Amount of Each Receipt this Period

72.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

172.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Gregory M. Telge, CLU, ChFC
Mailing Address 1655 North River Road

City State Zip Code
Manchester NH 03104

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642382

Amount of Each Receipt this Period

21.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Wayne E. Thomas, CLU, ChFC
Mailing Address 12 Chateau Haut Brion

City State Zip Code
Kenner LA 70065-2019

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642448

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Brad Tison, CLU, ChFC,
Mailing Address 3216 Southern Woods Drive

City State Zip Code
Des Moines IA 50321

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1640243

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

92.40

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. John D. Traynham, LUTCF

Mailing Address 210 Timber Lane

City State Zip Code
Anderson SC 29621-1126

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1640542

Amount of Each Receipt this Period

22.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Kenneth James Truman, LUTCF

Mailing Address 6413 O'Bannon

City State Zip Code
Las Vegas NV 89146

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642430

Amount of Each Receipt this Period

12.00

Payroll Deduction

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

Mr. Robert W. Tull, CLU, ChFC

Mailing Address 7815 Eagle Rock, N.E.

City State Zip Code
Albuquerque NM 87122

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: R1640402

Amount of Each Receipt this Period

25.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Jack B. Turner, CLU, ChFC

Mailing Address 310 Fairway Drive

City State Zip Code
 Clarksville TN 37043-4729

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1639151

Amount of Each Receipt this Period

500.00

Check

Full Name (Last, First, Middle Initial)

B. Mrs. Lynda D. Turner, LUTCF

Mailing Address 1070 South Bosque Loop

City State Zip Code
 Bosque Farms NM 87068-9063

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

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

Transaction ID: R1642821

Amount of Each Receipt this Period

45.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Ms. Charmaine Uhrig, LUTCF

Mailing Address RR 1 Box 273A

City State Zip Code
 Minatare NE 69356

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.50

Date of Receipt

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

Transaction ID: R1641103

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

587.50

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Howard Raymond Utz, LUTCF

Mailing Address PO Box 480

City State Zip Code
Mars PA 16046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642699

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Michael P. Victorino

Mailing Address 840 Alua St., #103

City State Zip Code
Wailuku HI 96793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643002

Amount of Each Receipt this Period

12.50

Payroll Deduction

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

Mr. Robert D. Vieluf, LUTCF

Mailing Address 403 Crestwood Estates

City State Zip Code
Collinsville IL 62234-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642628

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

76.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Richard D. Vonderlage, CSA, LUTCF

Mailing Address 15202 Sprague St

City State Zip Code
Omaha NE 68116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

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

Transaction ID: R1642531

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Thomas D. Voshall

Mailing Address 426 Towne Valley Dr.

City State Zip Code
Woodstock GA 30188-2636

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640858

Amount of Each Receipt this Period

21.00

Payroll Deduction

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

Mr. Brian P. Walsh, CLU, ChFC

Mailing Address 547 Wayfield

City State Zip Code
Wynnewood PA 19096-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1643486

Amount of Each Receipt this Period

250.00

Credit Card

SUBTOTAL of Receipts This Page (optional)

313.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Charles A. Webb
Mailing Address 2516 Longview Ave.

City State Zip Code
Roanoke VA 24014

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1640128

Amount of Each Receipt this Period

42.50

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. S. Mark Weeks, LUTCF, CLU
Mailing Address 1389 South 500 East

City State Zip Code
Salt Lake City UT 84105-2043

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.50

Date of Receipt

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

Transaction ID: R1642880

Amount of Each Receipt this Period

50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Matthew C. Weider, CLU, ChFC
Mailing Address 6855 Compton Heights Circle

City State Zip Code
Clifton VA 20124

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: R1640009

Amount of Each Receipt this Period

50.40

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

142.90

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Daniel J. Wells, LUTCF

Mailing Address 18830 Los Hermanos Ranch Rd

City State Zip Code
 Valley Center CA 92082-6808

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.50

Date of Receipt

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

Transaction ID: R1640733

Amount of Each Receipt this Period

45.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Daniel J. Wells, LUTCF

Mailing Address 18830 Los Hermanos Ranch Rd

City State Zip Code
 Valley Center CA 92082-6808

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.50

Date of Receipt

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

Transaction ID: R1643498

Amount of Each Receipt this Period

50.00

Credit Card

Full Name (Last, First, Middle Initial)

C. Mr. Marlin D. Wells, CLU, ChFC,

Mailing Address 2201 N. Washington

City State Zip Code
 Roswell NM 88201-3377

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1640528

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Lester E. Westgard, CLU
Mailing Address 2714 26th Ave SW

City State Zip Code
 Fargo ND 58103-5006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

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

Transaction ID: R1640345

Amount of Each Receipt this Period

60.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Irwin R. Wetnight, Jr., CLU
Mailing Address 95 W. Prescott Ave.

City State Zip Code
 Clovis CA 93619-8743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1642294

Amount of Each Receipt this Period

21.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. William T. Whitmore, Jr., LUTCF
Mailing Address P. O. Box 4748

City State Zip Code
 Virginia Beach VA 23454-0748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

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

Transaction ID: R1642270

Amount of Each Receipt this Period

50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

131.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Irv Wiese, CLU, ChFC,
Mailing Address 318 Stamford Bridge Rd

City State Zip Code
Columbia SC 29212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1640901

Amount of Each Receipt this Period

42.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Leroy L. Wilbers, Jr.
Mailing Address 309 Deerfield Pl

City State Zip Code
Jefferson City MO 65109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

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

Transaction ID: R1640881

Amount of Each Receipt this Period

126.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Michael J. Wilcox, LUTCF, CLTC
Mailing Address 117 Great Brook Rd.

City State Zip Code
New Milford CT 06776-3039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

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

Transaction ID: R1642596

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

189.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Ian C. Wilkinson, LUTCF

Mailing Address PO Box 7096

City State Zip Code
 Macon GA 31209-7896

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: R1640802

Amount of Each Receipt this Period

25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City State Zip Code
 Kennewick WA 99336-1280

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: R1640656

Amount of Each Receipt this Period

105.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Lucius Williamson, Jr., LUTCF

Mailing Address 1111 Howe Ave., Suite 530

City State Zip Code
 Sacramento CA 95825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: R1640222

Amount of Each Receipt this Period

21.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

151.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Cliff F. Wilson, CLU, ChFC,

Mailing Address 1458 W. Bahia Court

City State Zip Code
 Gilbert AZ 85233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

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

Transaction ID: R1640216

Amount of Each Receipt this Period

126.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Randall C. Wimsatt, LUTCF

Mailing Address 2501 E 20th, #10

City State Zip Code
 Farmington NM 87401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: R1642769

Amount of Each Receipt this Period

25.20

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. L. Nelson Wingert, CLU

Mailing Address 418 Gettysburg Pike

City State Zip Code
 Mechanicsburg PA 17055-5170

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: R1640776

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

176.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial)

Mr. Larry J. Winkelhake, CLU, ChFC

Mailing Address 18600 Longview Ct

City State Zip Code
 Brookfield WI 53045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: R1642292

Amount of Each Receipt this Period

90.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)

Mr. Benjamin Bunn Woodard, Jr.

Mailing Address 109 Bristol Court

City State Zip Code
 Rocky Mount NC 27803-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.25

Date of Receipt

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

Transaction ID: R1640753

Amount of Each Receipt this Period

46.75

Payroll Deduction

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

Mr. William G. Wunder, LUTC

Mailing Address 21110 Serene Way

City State Zip Code
 San Jose CA 95120-1217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6 / 2 0 0 6

Transaction ID: R1643196

Amount of Each Receipt this Period

50.00

Check

SUBTOTAL of Receipts This Page (optional)

186.75

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Mark L. Yavornitzki, CAE

Mailing Address 14 Bridle Pl.

City

E. Greenbush

State

NY

Zip Code

12061-1111

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: R1643114

Amount of Each Receipt this Period

25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City

Landenberg

State

PA

Zip Code

19350

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: R1643098

Amount of Each Receipt this Period

105.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

C. Mr. Charles D. Zaleski, CLU, ChFC

Mailing Address 28400 Ridgethorne Ct

City

Rancho Palos Verde

State

CA

Zip Code

90275-3258

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: R1642366

Amount of Each Receipt this Period

42.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

172.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Alan R. Zalewski, CLU, ChFC,

Mailing Address 6908 North 27th Street

City State Zip Code
 Tacoma WA 98407-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 6

Transaction ID: R1640966

Amount of Each Receipt this Period

50.00

Payroll Deduction

Full Name (Last, First, Middle Initial)

B. Mr. David G. Zick, CLU, ChFC

Mailing Address 851 Adams Court

City State Zip Code
 Bloomfield Hills MI 48304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 4 / 2 0 0 6

Transaction ID: R1639225

Amount of Each Receipt this Period

625.00

Check

Full Name (Last, First, Middle Initial)

C. Mr. Theodore J. Zouzounis, CLU

Mailing Address 820 Mariposa Rd

City State Zip Code
 Lafayette CA 94549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

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 / 1 0 / 2 0 0 6

Transaction ID: R1642269

Amount of Each Receipt this Period

42.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

717.50

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. H. Keith de Noble, LUTCF, CLU

Mailing Address 13200 W Markham Street, Suite 105

City State Zip Code
 Little Rock AR 72211-3285

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

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

Transaction ID: R1642787

Amount of Each Receipt this Period

30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

25696.39

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

Use separate schedule(s)
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(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. NAIFA

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042-1205

Purpose of Disbursement
Payroll, Benefits, Supplies, Copies,
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D9112

Date of Disbursement

10 / 17 / 2006

Amount of Each Disbursement this Period

25500.00

etc.

SUBTOTAL of Disbursements This Page (optional)

25500.00

TOTAL This Period (last page this line number only)

25500.00

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

Use separate schedule(s)
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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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. A Lot of People Who Support Jeff Bingaman

Mailing Address PO Box 16210

City Albuquerque State NM Zip Code 87191

Purpose of Disbursement
Contr. Jeff Bingaman (NM-D-US Senate)

Candidate Name
Jeff Bingaman

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NM District:

Transaction ID: D9005

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Ackerman for Congress

Mailing Address P O Box 650095

City Fresh Meadows State NY Zip Code 11365

Purpose of Disbursement
Contr. Gary L. Ackerman (NY-5-D-US)

Candidate Name
Gary L. Ackerman

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 05

Transaction ID: D9080

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

C. Akaka for Senate in 2006

Mailing Address Post Office Box 3169

City Honolulu State HI Zip Code 96802

Purpose of Disbursement
Contr. Daniel Kahikina Akaka (HI-D-US)

Candidate Name
Daniel Kahikina Akaka

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: HI District:

Transaction ID: D9019

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2500.00

Senate)

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bachmann for Congress

Mailing Address Box 49756

City Blaine State MN Zip Code 55449

Purpose of Disbursement
Contr. Michele Bachmann (MN-6-R-US)

Candidate Name
Michele Bachmann

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 06

Transaction ID: D9030

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

B. Baker for Congress Committee

Mailing Address Post Office Box 1694

City Baton Rouge State LA Zip Code 70821

Purpose of Disbursement
Contr. Richard H. Baker (LA-6-R-US)

Candidate Name
Richard H. Baker

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 06

Transaction ID: D9007

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

House)

Full Name (Last, First, Middle Initial)

C. Barney Frank for Congress Committee

Mailing Address P O Box 260

City Newtonville State MA Zip Code 02460

Purpose of Disbursement
Contr. Barney Frank (MA-4-D-US House)

Candidate Name
Barney Frank

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 04

Transaction ID: D9078

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

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
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Barrett for Congress

Mailing Address P.O. Box 869

City State Zip Code
Westminster SC 29693

Purpose of Disbursement
Contr. J. Gresham Barrett (SC-3-R-US)

Candidate Name
J. Gresham Barrett

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 03

Transaction ID: D9040

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

5000.00

House)

Full Name (Last, First, Middle Initial)

B. Becerra for Congress

Mailing Address PO Box 261060

City State Zip Code
Los Angeles CA 90026

Purpose of Disbursement
Contr. Xavier Becerra (CA-31-D-US House)

Candidate Name
Xavier Becerra

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: D9060

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Bilirakis for Congress

Mailing Address 610 S. Boulevard

City State Zip Code
Tampa FL 33606

Purpose of Disbursement
Contr. Gus Bilirakis (FL-9-R-US House)

Candidate Name
Gus Bilirakis

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 09

Transaction ID: D9026

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

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
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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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Boren For Congress

Mailing Address PO Box 149

City Okemah State OK Zip Code 74859

Purpose of Disbursement
Contr. Daniel Boren (OK-2-D-US House)

Candidate Name
Daniel Boren

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OK District: 02

Transaction ID: D9071

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Brad Miller Congressional Campaign

Mailing Address PO Box 20307

City Raleigh State NC Zip Code 27619

Purpose of Disbursement
Contr. Bradley Miller (NC-13-D-US House)

Candidate Name
Bradley Miller

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: D9043

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Brady for Congress

Mailing Address P.O. Box 8277

City The Woodlands State TX Zip Code 77387

Purpose of Disbursement
Contr. Kevin Brady (TX-8-R-US House)

Candidate Name
Kevin Brady

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 08

Transaction ID: D9090

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Campbell for Congress

Mailing Address 18004 Sky Park Circle, Suite 155

City Irvine State CA Zip Code 92660

Purpose of Disbursement
Contr. John Campbell (CA-48-R-US House)Candidate Name
John CampbellCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 48

Transaction ID: D9074

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 6 | | 2 | 0 | 0 | 6 |

Amount of Each Disbursement this Period

2500.00

B. Cantor for Congress

Mailing Address P. O. Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement
Contr. Eric I. Cantor (VA-7-R-US House)Candidate Name
Eric I. CantorCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 07

Transaction ID: D9048

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 6 | | 2 | 0 | 0 | 6 |

Amount of Each Disbursement this Period

5000.00

C. Carper for Senate

Mailing Address 19 East Commons Blvd, Second Floor

City New Castle State DE Zip Code 19720

Purpose of Disbursement
Contr. Thomas R. Carper (DE-D-US Senate)Candidate Name
Thomas R. CarperCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: DE District:

Transaction ID: D9001

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 2 | | 2 | 0 | 0 | 6 |

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles Boustany Jr. for Congress

Mailing Address 331 Beverly Drive

City State Zip Code
Lafayette LA 70503

Purpose of Disbursement
Contr. Charles W. Boustany, Jr.

Candidate Name
Charles W. Boustany, Jr.

Office Sought: ☒ House
☐ Senate
☐ President

State: LA District: 07

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

(LA-7-R-US House)

Full Name (Last, First, Middle Initial)

B. Chris Chocola for Congress, Inc.

Mailing Address PO Box 6728

City State Zip Code
South Bend IN 46660

Purpose of Disbursement
Contr. Christopher Chocola (IN-2-R-US

Candidate Name
Christopher Chocola

Office Sought: ☒ House
☐ Senate
☐ President

State: IN District: 02

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9029

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

House)

Full Name (Last, First, Middle Initial)

C. Clarke for Congress

Mailing Address 111-36 200th Street

City State Zip Code
Hollis NY 11412

Purpose of Disbursement
Contr. Yvette Clarke (NY-11-D-US House)

Candidate Name
Yvette Clarke

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 11

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9035

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Clay Jr. for Congress

Mailing Address 625 N Euclid Avenue, Suite 200

City State Zip Code
St. Louis MO 63108

Purpose of Disbursement
Contr. William Lacy Clay, Jr. (MO-1-D-US)

Candidate Name
William Lacy Clay, Jr.

Office Sought: ☒ House
☐ Senate
☐ President

State: MO District: 01

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9066

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

House)

B. Clyburn for Congress

Mailing Address P.O. Box 12567

City State Zip Code
Columbia SC 29211

Purpose of Disbursement
Contr. James E. Clyburn (SC-6-D-US)

Candidate Name
James E. Clyburn

Office Sought: ☒ House
☐ Senate
☐ President

State: SC District: 06

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9045

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

House)

C. Cole for Congress

Mailing Address P.O. Box 722256

City State Zip Code
Norman OK 73070

Purpose of Disbursement
Contr. Thomas Cole (OK-4-R-US House)

Candidate Name
Thomas Cole

Office Sought: ☒ House
☐ Senate
☐ President

State: OK District: 04

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9042

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Hank Johnson

Mailing Address 5240 Snapfinger Park Drive, Suite

City Decatur State GA Zip Code 30035

Purpose of Disbursement
Contr. Henry C. Johnson, Jr. (GA-4-D-US)

Candidate Name
Henry C. Johnson, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 04

Transaction ID: D9024

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

B. Committee to Elect Nydia M. Velazquez to Congress

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement
Contr. Nydia M. Velazquez (NY-12-D-US)

Candidate Name
Nydia M. Velazquez

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 12

Transaction ID: D9067

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

C. Dave Camp For Congress

Mailing Address P.O. Box 423

City Midland State MI Zip Code 48640

Purpose of Disbursement
Contr. David Lee Camp (MI-4-R-US House)

Candidate Name
David Lee Camp

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: D9053

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democrats for the Future

Mailing Address 20 Park Road
Suite E

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Contr. Democrats for the Future (PAC to
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
Annual

Transaction ID: D9009

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2500.00

PAC)

Full Name (Last, First, Middle Initial)

B. Devin Nunes Campaign Committee

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement
Contr. Devin G. Nunes (CA-21-R-US House)
Candidate Name
Devin G. Nunes

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 21 Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9052

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Doggett for U S Congress Committee

Mailing Address PO Box 5843

City Austin State TX Zip Code 78763

Purpose of Disbursement
Contr. Lloyd Doggett (TX-25-D-US House)
Candidate Name
Lloyd Doggett

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 25 Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9056

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Doolittle for Congress

Mailing Address 2150 River Plaza Drive #150

City Sacramento State CA Zip Code 95833

Purpose of Disbursement
Contr. John T. Doolittle (CA-4-R-US)

Candidate Name
John T. Doolittle

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 04

Transaction ID: D9017

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2000.00

House)

Full Name (Last, First, Middle Initial)

B. Ellen Tauscher for Congress

Mailing Address 20 Park Road, Suite E

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Contr. Ellen O. Tauscher (CA-10-D-US)

Candidate Name
Ellen O. Tauscher

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 10

Transaction ID: D9023

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

2000.00

House)

Full Name (Last, First, Middle Initial)

C. Fallin for Congress

Mailing Address 119 N Robinson, Suite 400

City Oklahoma City State OK Zip Code 73102

Purpose of Disbursement
Contr. Mary Fallin (OK-5-R-US House)

Candidate Name
Mary Fallin

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OK District: 05

Transaction ID: D9037

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Feinstein for Senate

Mailing Address 601 S. Glenoaks Blvd., Suite 208

City Burbank State CA Zip Code 91502

Purpose of Disbursement
Contr. Dianne Feinstein (CA-D-US Senate)

Candidate Name
Dianne Feinstein

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District:

Transaction ID: D9085

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

5000.00

B. Fossella for Congress

Mailing Address PO Box 060248
New Dorp Station

City Staten Island State NY Zip Code 10306

Purpose of Disbursement
Contr. Vito J. Fossella (NY-13-R-US)

Candidate Name
Vito J. Fossella

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 13

Transaction ID: D9034

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

House)

C. Friends of Carolyn McCarthy

Mailing Address 151 Linden Road

City Mineola State NY Zip Code 11501

Purpose of Disbursement
Contr. Carolyn McCarthy (NY-4-D-US)

Candidate Name
Carolyn McCarthy

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 04

Transaction ID: D9076

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2000.00

House)

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Charlie Wilson

Mailing Address 7 Cadiz Pike

City Bridgeport State OH Zip Code 43912

Purpose of Disbursement
Contr. Charles A. Wilson, Jr. (OH-6-D-US)

Candidate Name
Charles A. Wilson, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 06

Transaction ID: D9036

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

B. Friends of Craig Thomas

Mailing Address 2780 Olive Drive

City Cheyenne State WY Zip Code 82001

Purpose of Disbursement
Contr. Craig Thomas (WY-R-US Senate)

Candidate Name
Craig Thomas

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: WY District:

Transaction ID: D9004

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Friends of Dick Lugar Inc.

Mailing Address 47 S Meridian Street/Suite 200

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
Contr. Richard G. Lugar (IN-R-US Senate)

Candidate Name
Richard G. Lugar

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District:

Transaction ID: D9058

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Don Sherwood

Mailing Address 81 Warren Street

City Tunkhannock State PA Zip Code 18657

Purpose of Disbursement
Contr. Donald L. Sherwood (PA-10-R-US)

Candidate Name
Donald L. Sherwood

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 10

Transaction ID: D9057

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

2000.00

House)

Full Name (Last, First, Middle Initial)

B. Friends of Joe Baca

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Contr. Joseph Baca (CA-43-D-US House)

Candidate Name
Joseph Baca

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 43

Transaction ID: D9065

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of John Tanner

Mailing Address Post Office Box 1994

City Union City State TN Zip Code 38281

Purpose of Disbursement
Contr. John S. Tanner (TN-8-D-US House)

Candidate Name
John S. Tanner

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 08

Transaction ID: D9000

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Robert C Byrd Committee

Mailing Address 607 14th Street, NW; Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contr. Robert C. Byrd (WV-D-US Senate)

Candidate Name
Robert C. Byrd

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District:

Transaction ID: D9003

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

5000.00

B. Friends of Roy Blunt

Mailing Address PO Box 50100

City Springfield State MO Zip Code 65805

Purpose of Disbursement
Contr. Roy Blunt (MO-7-R-US House)

Candidate Name
Roy Blunt

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: D9054

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

3000.00

C. Friends of Sam Johnson

Mailing Address PO Box 860096

City Plano State TX Zip Code 75086

Purpose of Disbursement
Contr. Samuel Robert Johnson (TX-3-R-US

Candidate Name
Samuel Robert Johnson

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 03

Transaction ID: D9089

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

5000.00

House)

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

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| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gard for Congress

Mailing Address PO Box 277

City
Green Bay

State
WI

Zip Code
54305

Purpose of Disbursement
Contr. John Gard (WI-8-R-US House)

Candidate Name
John Gard

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: D9022

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Gary Miller for Congress

Mailing Address 721 S Brea Canyon Road Suite 7

City
Diamond Bar

State
CA

Zip Code
91789

Purpose of Disbursement
Contr. Gary G. Miller (CA-42-R-US House)

Candidate Name
Gary G. Miller

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 42

Transaction ID: D9079

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Gene Green Congressional Campaign

Mailing Address PO Box 16128

City
Houston

State
TX

Zip Code
77222

Purpose of Disbursement
Contr. Gene Green (TX-29-D-US House)

Candidate Name
Gene Green

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 29

Transaction ID: D9069

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

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
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Geoff Davis for Congress

Mailing Address 3161 Dixie Highway, Suite F

City Erlanger State KY Zip Code 41018

Purpose of Disbursement
Contr. Geoffrey Davis (KY-4-R-US House)

Candidate Name
Geoffrey Davis

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 04

Transaction ID: D9073

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Graf for Congress

Mailing Address 287 W El Nopal

City Green Valley State AZ Zip Code 85614

Purpose of Disbursement
Contr. Randall Graf (AZ-8-R-US House)

Candidate Name
Randall Graf

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 08

Transaction ID: D9013

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Harold Ford Jr. for Tennessee

Mailing Address 5120 Barry Road/Suite 1300

City Memphis State TN Zip Code 38117

Purpose of Disbursement
Contr. Harold E. Ford, Jr. (TN-D-US)

Candidate Name
Harold E. Ford, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 09

Transaction ID: D9025

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

5000.00

Senate)

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

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

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| <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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Heller for Congress

Mailing Address PO Box 750580

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
Contr. Dean Heller (NV-2-R-US House)

Candidate Name
Dean Heller

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 02

Transaction ID: D9038

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Hoyer for Congress

Mailing Address 7905 Malcolm Road Suite 102

City Clinton State MD Zip Code 20735

Purpose of Disbursement
Contr. Steny H. Hoyer (MD-5-D-US House)

Candidate Name
Steny H. Hoyer

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 05

Transaction ID: D9028

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Hulshof for Congress

Mailing Address Post Office Box 1621

City Columbia State MO Zip Code 65010

Purpose of Disbursement
Contr. Kenny C. Hulshof (MO-9-R-US)

Candidate Name
Kenny C. Hulshof

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 09

Transaction ID: D9055

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

House)

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hutchison for U.S. Senate

Mailing Address PO Box 9190; 800 Brazos, Suite 120

City Dallas State TX Zip Code 75209

Purpose of Disbursement
Contr. Kay Bailey Hutchison (TX-R-US)

Candidate Name
Kay Bailey Hutchison

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Transaction ID: D9002

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

5000.00

Senate)

Full Name (Last, First, Middle Initial)

B. Jobs Opportunity & Education PAC

Mailing Address P. O. Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement
Contr. JOE PAC (PAC to PAC)

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Annual

Transaction ID: D9010

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. John D. Dingell for Congress Comm.

Mailing Address 5467 Schaefer Road

City Dearborn State MI Zip Code 48126

Purpose of Disbursement
Contr. John D. Dingell (MI-15-D-US)

Candidate Name
John D. Dingell

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: D9062

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

2500.00

House)

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Lewis for Congress Cmte

Mailing Address 1520 Pinehurst Drive, SW

City Atlanta State GA Zip Code 30311

Purpose of Disbursement
Contr. John Lewis (GA-5-D-US House)

Candidate Name
John Lewis

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 05

Transaction ID: D9061

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. John Sarbanes for Congress

Mailing Address PO Box 6854

City Towson State MD Zip Code 21285

Purpose of Disbursement
Contr. John Sarbanes (MD-3-D-US House)

Candidate Name
John Sarbanes

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 03

Transaction ID: D9094

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Jon Kyl for U S Senate

Mailing Address Post Office Box 10246

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement
Contr. Jon Kyl (AZ-R-US Senate)

Candidate Name
Jon Kyl

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District:

Transaction ID: D9011

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Judy Biggert for Congress

Mailing Address P.O. Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement
Contr. Judy Biggert (IL-13-R-US House)

Candidate Name
Judy Biggert

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 13

Transaction ID: D9072

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Kennedy for Senate 2006

Mailing Address 426 C Street Northeast - Rear Bldg

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contr. Edward M. Kennedy (MA-D-US)

Candidate Name
Edward M. Kennedy

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District:

Transaction ID: D9020

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

5000.00

Senate)

Full Name (Last, First, Middle Initial)

C. Knollenberg for Congress

Mailing Address 30701 Woodward Avenue, Suite 300

City Royal Oak State MI Zip Code 48073

Purpose of Disbursement
Contr. Joe Knollenberg (MI-9-R-US House)

Candidate Name
Joe Knollenberg

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 09

Transaction ID: D9049

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. LaTourette for Congress Committee

Mailing Address 7200 Center Street/Suite 102

City State Zip Code
Mentor OH 44060

Purpose of Disbursement
Contr. Steven C. LaTourette (OH-14-R-US)

Candidate Name
Steven C. LaTourette

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 14

Transaction ID: D9087

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

1500.00

House)

Full Name (Last, First, Middle Initial)

B. Levin for Congress Committee

Mailing Address 30636 Dequindre

City State Zip Code
Warren MI 48092

Purpose of Disbursement
Contr. Sander M. Levin (MI-12-D-US)

Candidate Name
Sander M. Levin

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: D9093

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

C. Mark Udall for Congress Inc.

Mailing Address 8690 Wolff Court #200

City State Zip Code
Westminster CO 80031

Purpose of Disbursement
Contr. Mark Udall (CO-2-D-US House)

Candidate Name
Mark Udall

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 02

Transaction ID: D9014

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matheson for Congress

Mailing Address 677 South 200 West, Suite A

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement
Contr. James D. Matheson (UT-2-D-US)

Candidate Name
James D. Matheson

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: UT District: 02

Transaction ID: D9015

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

2500.00

House)

B. McCrery for Congress Committee

Mailing Address Post Office Box 52956
333 Texas Street Suite 1900

City Shreveport State LA Zip Code 71135

Purpose of Disbursement
Contr. Jim McCrery (LA-4-R-US House)

Candidate Name
Jim McCrery

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 04

Transaction ID: D9006

Date of Disbursement

10 / 03 / 2006

Amount of Each Disbursement this Period

5000.00

C. McNulty For Congress

Mailing Address PO Box 1560

City Green Island State NY Zip Code 12183

Purpose of Disbursement
Contr. Michael R. McNulty (NY-21-D-US)

Candidate Name
Michael R. McNulty

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 21

Transaction ID: D9050

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

3000.00

House)

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Meeks for Congress

Mailing Address 219-10 South Conduit Avenue

City Springfield Garden State NY Zip Code 11413

Purpose of Disbursement
Contr. Gregory W. Meeks (NY-6-D-US)

Candidate Name
Gregory W. Meeks

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 06

Transaction ID: D9081

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

House)

B. Mel Watt for Congress Committee

Mailing Address PO Box 36831

City Charlotte State NC Zip Code 28236

Purpose of Disbursement
Contr. Melvin L. Watt (NC-12-D-US House)

Candidate Name
Melvin L. Watt

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 12

Transaction ID: D9068

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

C. Mike Rogers for Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Contr. Michael J. Rogers (MI-8-R-US)

Candidate Name
Michael J. Rogers

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 08

Transaction ID: D9031

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

House)

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson for Congress

Mailing Address 5435 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Contr. Michael Thompson (CA-1-D-US)

Candidate Name
Michael Thompson

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 01

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9059

Date of Disbursement

10 / 09 / 2006

Amount of Each Disbursement this Period

5000.00

House)

Full Name (Last, First, Middle Initial)

B. Nancy Johnson For Congress

Mailing Address P.O. Box 1986

City New Britain State CT Zip Code 06050

Purpose of Disbursement
Contr. Nancy L. Johnson (CT-5-R-US)

Candidate Name
Nancy L. Johnson

Office Sought: ☒ House
☐ Senate
☐ President

State: CT District: 05

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9070

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

House)

Full Name (Last, First, Middle Initial)

C. Nancy Pelosi for Congress

Mailing Address 235 Montgomery Street Suite 610

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Contr. Nancy Pelosi (CA-8-D-US House)

Candidate Name
Nancy Pelosi

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 08

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D9044

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Narragansett Bay PAC

Mailing Address PO Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement
Contr. Narragansett Bay PAC (PAC to PAC)

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
Annual

State: District:

Transaction ID: D9095

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. People With Hart

Mailing Address PO Box 435

City Wexford State PA Zip Code 15090

Purpose of Disbursement
Contr. Melissa A. Hart (PA-4-R-US House)

Candidate Name
Melissa A. Hart

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 04

Transaction ID: D9051

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Rangel for Congress Committee

Mailing Address PO Box 5577 - Manhattanville Stati

City New York State NY Zip Code 10027

Purpose of Disbursement
Contr. Charles B. Rangel (NY-15-D-US)

Candidate Name
Charles B. Rangel

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: D9088

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

House)

SUBTOTAL of Disbursements This Page (optional)

10500.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ray Meier for Congress Committee

Mailing Address PO Box 120

City State Zip Code
Utica NY 13503

Purpose of Disbursement
Contr. Ray Meier (NY-24-R-US House)

Candidate Name
Ray Meier

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D9039

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Rob Andrews For Congress

Mailing Address Ellisburg Plaza
20 Brace Street, Suite 200

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
Contr. Robert E. Andrews (NJ-1-D-US)

Candidate Name
Robert E. Andrews

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 01

Transaction ID: D8999

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

C. Sali for Congress

Mailing Address PO Box 71

City State Zip Code
Kuna ID 83634

Purpose of Disbursement
Contr. Bill Sali (ID-1-R-US House)

Candidate Name
Bill Sali

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: ID District: 01

Transaction ID: D9033

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

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:
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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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sam Farr for Congress

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Contr. Sam Farr (CA-17-D-US House)

Candidate Name
Sam Farr

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 17

Transaction ID: D9021

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Simmons for Congress

Mailing Address P.O. Box 268 Drawer 271

City Stonington State CT Zip Code 06378

Purpose of Disbursement
Contr. Robert R. Simmons (CT-2-R-US)

Candidate Name
Robert R. Simmons

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District: 02

Transaction ID: D9091

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

House)

Full Name (Last, First, Middle Initial)

C. Spratt for Congress Committee

Mailing Address PO Box 830

City York State SC Zip Code 29745

Purpose of Disbursement
Contr. John M. Spratt, Jr. (SC-5-D-US)

Candidate Name
John M. Spratt, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 05

Transaction ID: D9046

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

3500.00

House)

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stabenow for Congress

Mailing Address PO Box 4945

City
E Lansing

State
MI

Zip Code
48826

Purpose of Disbursement
Contr. Debbie Stabenow (MI-D-US Senate)

Candidate Name
Debbie Stabenow

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: D9041

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Stephanie Tubbs Jones for US Congress

Mailing Address 3729 Silsby Rd

City
University Heights

State
OH

Zip Code
44118

Purpose of Disbursement
Contr. Stephanie Tubbs Jones (OH-11-D-US

Candidate Name
Stephanie Tubbs Jones

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 11

Transaction ID: D9063

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

House)

Full Name (Last, First, Middle Initial)

C. Stephen F Lynch for Congress Committee

Mailing Address 109 O Street

City
South Boston

State
MA

Zip Code
02127

Purpose of Disbursement
Contr. Stephen F. Lynch (MA-9-D-US

Candidate Name
Stephen F. Lynch

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 09

Transaction ID: D9077

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

House)

SUBTOTAL of Disbursements This Page (optional)

12500.00

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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Jim Ramstad Volunteer Committee

Mailing Address 1809 South Plymouth/Suite 310B

City Minnetonka State MN Zip Code 55305

Purpose of Disbursement
Contr. Jim M. Ramstad (MN-3-R-US House)

Candidate Name
Jim M. Ramstad

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 03

Transaction ID: D9047

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Vern Buchanan for Congress

Mailing Address PO Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
Contr. Vern Buchanan (FL-13-R-US House)

Candidate Name
Vern Buchanan

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 13

Transaction ID: D9027

Date of Disbursement

10 / 04 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Walter Jones Jr. For Congress

Mailing Address P.O. Box 99667

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
Contr. Walter B. Jones, Jr. (NC-3-R-US

Candidate Name
Walter B. Jones, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 03

Transaction ID: D9086

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2500.00

House)

SUBTOTAL of Disbursements This Page (optional)

7500.00

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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Weldon For Congress Committee

Mailing Address P.O. Box 1992

City
Media

State
PA

Zip Code
19063

Purpose of Disbursement
Contr. Curt Weldon (PA-7-R-US House)

Candidate Name
Curt Weldon

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 07

Transaction ID: D9018

Date of Disbursement

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

283000.00

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)

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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 checked="" 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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Mike Ayres

Mailing Address 9514 Brookridge Court

City State Zip Code
Wichita KS 67205

Purpose of Disbursement
Refund to Individual

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D9064

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ms. Theresa K. Thompson

Mailing Address 2200 Mountain Rd

City State Zip Code
Springdale AR 72764

Purpose of Disbursement
Refund to Individual

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D9092

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)

60.00

TOTAL This Period (last page this line number only)

60.00

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

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 NAIFA

 Nature of Debt (Purpose):
 Payroll, Benefits, Supplies, Copies, etc

Mailing Address 2901 Telestar Court

 City State ZIP Code
 Falls Church VA 22042-1205

Outstanding Balance Beginning This Period

133667.69

Transaction ID: DD#7711

Amount Incurred This Period

2909.45

Payment This Period

25500.00

Outstanding Balance at Close of This Period

111077.14

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

111077.14

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

111077.14

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶