

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines OUR CONGRESS POLITICAL ACTION COMMITTEE

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

2. FEC IDENTIFICATION NUMBER C00402412 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Vickie L. Winpisinger

Signature of Treasurer Electronically Filed by Vickie L. Winpisinger Date 01 08 2010

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

Our Congress PAC is a small committee that has few administrative expenses. Currently, it has no paid staff or rented office space and relies primarily on a consulting firm (Winpisinger & Associates, Inc.) and volunteers to administer the Committee's activities. All of the expenses incurred to operate the Committee, including payments to its consultant, have been reported as federal operating expenditures on the Committee's FEC reports.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
OUR CONGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		9960.10
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	24798.96									
(c) Total Receipts (from Line 19)	67250.00	108750.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	92048.96	118710.10								
7. Total Disbursements (from Line 31)	54368.99	81030.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37679.97	37679.97								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

OUR CONGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1250.00	2750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1250.00	2750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	66000.00	106000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	67250.00	108750.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	67250.00	108750.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	67250.00	108750.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	9868.99	20030.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9868.99	20030.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44500.00	61000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	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))..	54368.99	81030.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54368.99	81030.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	67250.00	108750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	67250.00	108750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9868.99	20030.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9868.99	20030.13

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Stephen B. Clark

Mailing Address 9273 Lerwick Dr.

City State Zip Code
Dublin OH 43017-9492

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Clark & Associates President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
07 / 31 / 2009

Transaction ID: C170

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Victor H. Fazio

Mailing Address 1333 New Hampshire Ave., NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Akin Gump LLP Senior Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
12 / 18 / 2009

Transaction ID: C197

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
John H. Montgomery

Mailing Address 101 Constitution Avenue, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Murray, Montgomery & O'Donnell Senior Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
09 / 22 / 2009

Transaction ID: C178

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1250.00

TOTAL This Period (last page this line number only) 1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 31

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial) AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE (AKA AGSH&F CIVIC ACTION COMMITTEE) Mailing Address 1333 New Hampshire Ave., NW City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. C C00104901 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 9 Transaction ID: C192 Amount of Each Receipt this Period 750.00
---	--

B. Full Name (Last, First, Middle Initial) ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC) Mailing Address 101 Constitution Ave NW Suite 400W City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. C C00089136 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 9 Transaction ID: C177 Amount of Each Receipt this Period 2500.00
---	---

C. Full Name (Last, First, Middle Initial) AMERICAN ACADEMY OF AUDIOLOGY, INC. PAC Mailing Address 11730 Plaza America Drive Suite 30 City State Zip Code Reston VA 20190 FEC ID number of contributing federal political committee. C C00342972 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 9 Transaction ID: C183 Amount of Each Receipt this Period 1500.00
---	---

SUBTOTAL of Receipts This Page (optional) ▶	4750.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 9 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR RESPIRATORY CARE POLITICAL ACTION COMMITTEE (AARCPAC) Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Mailing Address 9425 MACARTHUR BLVD SUITE 100
Transaction ID: C196

City Irving State TX Zip Code 75063
Amount of Each Receipt this Period
750.00

FEC ID number of contributing federal political committee. **C** C00150201

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
750.00

B. Full Name (Last, First, Middle Initial)
AMERICAN CHIROPRACTIC ASSOCIATION PAC Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 9

Mailing Address 1701 Clarendon Blvd
Transaction ID: C169

City Arlington State VA Zip Code 22209
Amount of Each Receipt this Period
1500.00

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
1500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN GAS ASSOCIATION POLITICAL ACTION COMMITTEE Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Mailing Address 400 N. Capitol St., NW
Transaction ID: C199

City Washington State DC Zip Code 20001
Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
1000.00

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 31
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) AMERICAN HOSPITAL ASSOCIATION PAC	Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 325 Seventh Street, NW Suite 700	Transaction ID: C180
	City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C C00106146	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

B.	Full Name (Last, First, Middle Initial) AMERICAN HOTEL AND LODGING ASSOCIATION PAC	Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2009
	Mailing Address 1201 New York Avenue NW Sixth Floor	Transaction ID: C193
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00001198	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE	Date of Receipt M M / D D / Y Y Y Y Y 08 / 06 / 2009
	Mailing Address 1111 North Fairfax St.	Transaction ID: C174
	City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C C00012880	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 11 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE
 Mailing Address 520 N. NORTHWEST HIGHWAY
 City State Zip Code
 PARK RIDGE IL 60068
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 2 3 / 2 0 0 9
Transaction ID: C203
 Amount of Each Receipt this Period
 1500.00
 FEC ID number of contributing federal political committee. **C** C00255752
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

B. Full Name (Last, First, Middle Initial)
CENTURYTEL INC. FEDERAL POLITICAL ACTION COMMITTEE
 Mailing Address 100 CenturyLink Drive
 City State Zip Code
 Monroe LA 71203
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 8 / 2 0 0 9
Transaction ID: C202
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C** C00225524
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

C. Full Name (Last, First, Middle Initial)
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE
 Mailing Address 1350 I Street, NW
 Suite 590
 City State Zip Code
 Washington DC 20005
 Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 3 0 / 2 0 0 9
Transaction ID: C181
 Amount of Each Receipt this Period
 1500.00
 FEC ID number of contributing federal political committee. **C** C00274944
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 31
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address **1701 JFK Blvd, 49th Floor
35th Floor**

City **Philadelphia** State **PA** Zip Code **19103**

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt **MM / DD / YYYY**
07 / 31 / 2009

Transaction ID: C171

Amount of Each Receipt this Period **1500.00**

B. Full Name (Last, First, Middle Initial)
ENERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)

Mailing Address **425 West Capitol Avenue, Ste24B**

City **Little Rock** State **AR** Zip Code **72201**

FEC ID number of contributing federal political committee. **C C00363879**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3500.00**

Date of Receipt **MM / DD / YYYY**
12 / 29 / 2009

Transaction ID: C200

Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
GREENBERG TRAUERIG, P.A. PAC

Mailing Address **1221 Brickell Avenue**

City **Miami** State **FL** Zip Code **33131**

FEC ID number of contributing federal political committee. **C C00266585**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **MM / DD / YYYY**
09 / 30 / 2009

Transaction ID: C184

Amount of Each Receipt this Period **2000.00**

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 9 / 2 0 0 9

Transaction ID: C176

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 9

Transaction ID: C198

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 412 First Street, SE, Suite 300

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 6 / 2 0 0 9

Transaction ID: C172

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► 6500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 31
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 412 First Street, SE, Suite 300

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: C187
Amount of Each Receipt this Period: 3500.00

B. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14th Street, NW Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 22 / 2009
Transaction ID: C201
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 08 / 17 / 2009
Transaction ID: C175
Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 31
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **16011 NE 36th Way
Box 97017**

City **Redmond** State **WA** Zip Code **98073**

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **12 / 24 / 2009**

Transaction ID: C195

Amount of Each Receipt this Period **1000.00**

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address **430 North Michigan Avenue**

City **Chicago** State **IL** Zip Code **60611**

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **12 / 10 / 2009**

Transaction ID: C191

Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address **100 Daingerfield Road**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00030809**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **08 / 06 / 2009**

Transaction ID: C173

Amount of Each Receipt this Period **5000.00**

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 31
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Avenue
Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C182

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 5900 South Western Avenue
Suite 102

City State Zip Code
Sioux Falls SD 57108

FEC ID number of contributing federal political committee. **C** C00394163

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2009

Transaction ID: C188

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 Massachusetts Avenue, NE
1st Floor

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2009

Transaction ID: C189

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **12500.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 31

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) RAYTHEON COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 1100 Wilson Blvd Suite 1500		<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Arlington	VA	22209
	FEC ID number of contributing federal political committee.		<input type="text" value="C00097568"/>
Name of Employer		Occupation	Transaction ID: C168
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="2500.00"/>

B.	Full Name (Last, First, Middle Initial) RITE AID CORPORATION POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 30 Hunter Lane		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Camp Hill	PA	17011
	FEC ID number of contributing federal political committee.		<input type="text" value="C00104083"/>
Name of Employer		Occupation	Transaction ID: C186
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>

C.	Full Name (Last, First, Middle Initial) UNITED PARCEL SERVICE INC. PAC		Date of Receipt
	Mailing Address 55 Glenlake Parkway NE		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Atlanta	GA	30328
	FEC ID number of contributing federal political committee.		<input type="text" value="C00064766"/>
Name of Employer		Occupation	Transaction ID: C185
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="3000.00"/>	<input type="text" value="3000.00"/>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 31
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATION INC. GOOD GOVT CLUB

Mailing Address 1300 I St NW
Ste 400 West

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY
12 / 10 / 2009

Transaction ID: C190

Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
WATERPAC - NATIONAL RURAL WATER ASSOCIATION POLITICAL COMMITTEE

Mailing Address 2915 SOUTH 13TH

City DUNCAN State OK Zip Code 73533

FEC ID number of contributing federal political committee. **C** C00202184

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY
09 / 22 / 2009

Transaction ID: C179

Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	66000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A. Full Name (Last, First, Middle Initial) Molly Allen Associates Mailing Address 1405 Woodman Avenue City Silver Spring State MD Zip Code 20902 Purpose of Disbursement Fundraising consulting fee/expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D350 Date of Disbursement 07 / 06 / 2009
	Amount of Each Disbursement this Period 512.78 Not for any federal candidate

B. Full Name (Last, First, Middle Initial) Molly Allen Associates Mailing Address 1405 Woodman Avenue City Silver Spring State MD Zip Code 20902 Purpose of Disbursement Fundraising consulting fee/expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D352 Date of Disbursement 08 / 03 / 2009
	Amount of Each Disbursement this Period 4848.33 Not for any federal candidate

C. Full Name (Last, First, Middle Initial) Molly Allen Associates Mailing Address 1405 Woodman Avenue City Silver Spring State MD Zip Code 20902 Purpose of Disbursement Generic fundraising consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D356 Date of Disbursement 09 / 08 / 2009
	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	5861.11
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Molly Allen Associates	Transaction ID: D373 Date of Disbursement 10 / 05 / 2009
	Mailing Address 1405 Woodman Avenue	Amount of Each Disbursement this Period 500.00
	City Silver Spring State MD Zip Code 20902	
	Purpose of Disbursement Generic fundraising consulting fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Molly Allen Associates	Transaction ID: D379 Date of Disbursement 11 / 03 / 2009
	Mailing Address 1405 Woodman Avenue	Amount of Each Disbursement this Period 14.96
	City Silver Spring State MD Zip Code 20902	
	Purpose of Disbursement Generic fundraising expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Not for any federal candidate

C.	Full Name (Last, First, Middle Initial) Molly Allen Associates	Transaction ID: D378 Date of Disbursement 11 / 03 / 2009
	Mailing Address 1405 Woodman Avenue	Amount of Each Disbursement this Period 500.00
	City Silver Spring State MD Zip Code 20902	
	Purpose of Disbursement Generic fundraising consulting fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1014.96
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) Molly Allen Associates</p> <p>Mailing Address 1405 Woodman Avenue</p> <p>City Silver Spring State MD Zip Code 20902</p> <p>Purpose of Disbursement Generic fund. consulting fee/expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D381 Date of Disbursement 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 550.00</p> <p>Not for any federal candidate</p>
<p>B. Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc.</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement Postage reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D351 Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 35.29</p>
<p>C. Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc.</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement Administrative services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D387 Date of Disbursement 12 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1585.29

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) Visa Credit Card Operations <hr/> Mailing Address PO Box 22116 <hr/> City Tulsa State OK Zip Code 74121 <hr/> Purpose of Disbursement Credit card (see below) Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D353 Date of Disbursement 08 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 1363.06
B.	Full Name (Last, First, Middle Initial) Bobby Van's Steakhouse <hr/> Mailing Address 809 15th St NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Generic Fundraising/Catering Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D355 Date of Disbursement 08 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 1264.06 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Visa Credit Card Operations <hr/> Mailing Address PO Box 22116 <hr/> City Tulsa State OK Zip Code 74121 <hr/> Purpose of Disbursement Credit card (business meal) Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D388 Date of Disbursement 10 / 12 / 2009 <hr/> Amount of Each Disbursement this Period 44.57

SUBTOTAL of Disbursements This Page (optional) ►

1407.63

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

9868.99

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A. Full Name (Last, First, Middle Initial) ARCURI FOR CONGRESS <hr/> Mailing Address P.O. Box 8508 <hr/> City Utica State NY Zip Code 13505 <hr/> Purpose of Disbursement Contribution Candidate Name Michael A Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D358 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BILL OWENS FOR CONGRESS <hr/> Mailing Address PO BOX 1575 <hr/> City PLATTSBURGH State NY Zip Code 12901 <hr/> Purpose of Disbursement Contribution Candidate Name William Owens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: D377 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
C. Full Name (Last, First, Middle Initial) BOCCIERI FOR CONGRESS <hr/> Mailing Address PO Box 20535 <hr/> City Canton State OH Zip Code 44701 <hr/> Purpose of Disbursement Contribution Candidate Name John A. Bocchieri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D383 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) BOSWELL FOR CONGRESS</p> <p>Mailing Address PO Box 6220</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Leonard L Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D359 Date of Disbursement 09 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS</p> <p>Mailing Address P.O. Box 15703</p> <p>City Tallahassee State FL Zip Code 32317</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name F. Allen Boyd, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D376 Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) BRIGHT FOR CONGRESS.COM</p> <p>Mailing Address P.O.Box 2106</p> <p>City Montgomery State AL Zip Code 36102</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Bobby Neal Bright, Sr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D360 Date of Disbursement 09 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 31

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) CARNEY FOR CONGRESS	Transaction ID: D361 Date of Disbursement
	Mailing Address P.O. Box A	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Clarks Summit State PA Zip Code 18411	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Christopher P Carney	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District: 10	

B.	Full Name (Last, First, Middle Initial) CHARLIE MELANCON CAMPAIGN COMMITTEE INC	Transaction ID: D372 Date of Disbursement
	Mailing Address PO Box 549	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Napoleonville State LA Zip Code 70390	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Charlie Melancon, Jr.	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: LA District: 00	

C.	Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS	Transaction ID: D362 Date of Disbursement
	Mailing Address PO BOX 177	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City BOONEVILLE State MS Zip Code 38829	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Travis W. Childers	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MS District: 01	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A. Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS Mailing Address PO BOX 177 City BOONEVILLE State MS Zip Code 38829 Purpose of Disbursement Contribution Candidate Name Travis W. Childers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D385 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 3000.00 Category/Type
B. Full Name (Last, First, Middle Initial) ELLSWORTH FOR CONGRESS COMMITTEE Mailing Address P.O. Box 62 City Evansville State IN Zip Code 47701 Purpose of Disbursement Contribution Candidate Name Brad Ellsworth Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D357 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type
C. Full Name (Last, First, Middle Initial) FRANK KRATOVIL FOR CONGRESS Mailing Address 222 Main Sail Drive PO Box 518 City Stevensville State MD Zip Code 21666 Purpose of Disbursement Contribution Candidate Name Frank M. Kratovil, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D367 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) FRIENDS OF GLENN NYE</p> <p>Mailing Address PO BOX 68444</p> <p>City VIRGINIA BEACH State VA Zip Code 23471</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Glenn Nye</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D370 Date of Disbursement 09 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF GLENN NYE</p> <p>Mailing Address PO BOX 68444</p> <p>City VIRGINIA BEACH State VA Zip Code 23471</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Glenn Nye</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D382 Date of Disbursement 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS</p> <p>Mailing Address PO Box 12886</p> <p>City Tucson State AZ Zip Code 85732</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Gabrielle Giffords</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364 Date of Disbursement 09 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) GRIFFITH FOR CONGRESS	Transaction ID: D365 Date of Disbursement
	Mailing Address PO BOX 2916	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Huntsville State AL Zip Code 35804	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name R. Parker Griffith	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AL District: 05	

B.	Full Name (Last, First, Middle Initial) HARRY MITCHELL FOR CONGRESS	Transaction ID: D369 Date of Disbursement
	Mailing Address PO Box 23748	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Tempe State AZ Zip Code 85285	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Harry E Mitchell	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AZ District: 05	

C.	Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL	Transaction ID: D366 Date of Disbursement
	Mailing Address PO Box 1071	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Seymour State IN Zip Code 47274	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Baron P Hill	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 09	

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A.	Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL	Transaction ID: D375 Date of Disbursement 10 / 15 / 2009
	Mailing Address PO Box 1071	Amount of Each Disbursement this Period 4000.00
	City Seymour State IN Zip Code 47274	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Baron P Hill	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 09	

B.	Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE	Transaction ID: D380 Date of Disbursement 11 / 03 / 2009
	Mailing Address P.O. Box A	Amount of Each Disbursement this Period 2500.00
	City Harrisonville State MO Zip Code 64701	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Ike Skelton	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MO District: 04	

C.	Full Name (Last, First, Middle Initial) JOE DONNELLY FOR CONGRESS	Transaction ID: D384 Date of Disbursement 12 / 11 / 2009
	Mailing Address PO Box 1961	Amount of Each Disbursement this Period 1000.00
	City South Bend State IN Zip Code 46634	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Joe Donnelly	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 02	

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)

<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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

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

Mailing Address PO Box 1045

City Erie State PA Zip Code 16512

Purpose of Disbursement
Contribution

Candidate Name
Kathy Dahlkemper

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 03

Transaction ID: D363

Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

1000.00

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

Mailing Address P O Box 306

City Boise State ID Zip Code 83701

Purpose of Disbursement
Contribution

Candidate Name
Walter Clifford Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D368

Date of Disbursement

09 / 21 / 2009

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 615 Glen Street

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement
Contribution

Candidate Name
Scott Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 20

Transaction ID: D386

Date of Disbursement

12 / 17 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

A. Full Name (Last, First, Middle Initial)
STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA

Mailing Address PO Box 2009

City State Zip Code
Sioux Falls SD 57101

Purpose of Disbursement
Contribution

Candidate Name
Stephanie Herseht-Sandlin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SD District: 00

Transaction ID: D374

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address 726 Sixteenth Street NE

City State Zip Code
Massillon OH 44646

Purpose of Disbursement
Contribution

Candidate Name
Zachary T Space

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 18

Transaction ID: D371

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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