

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

ADDRESS (number and street) 7829 E. Rockhill #201 WICHITA KS 67206

2. FEC IDENTIFICATION NUMBER C00251447 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, Convention, Special, Runoff. (d) 30-Day Post -Election Report for the: General, Runoff, Special.

5. Covering Period 07 01 2010 through 09 30 2010

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 Mary Adolf

Signature of Treasurer Electronically Filed by Mary Adolf Date 10 13 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 10 columns and 1 row. Column 1: Office Use Only. Column 9: FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		22798.75
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	89046.84									
(c) Total Receipts (from Line 19) .....	12150.00	116110.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	101196.84	138908.75								
7. Total Disbursements (from Line 31) .....	74107.97	111819.88								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	27088.87	27088.87								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

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) .....	12000.00	113815.00
(ii) Unitemized .....	150.00	2295.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12150.00	116110.00
(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) .....	12150.00	116110.00
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)) .....	12150.00	116110.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12150.00	116110.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	107.97	1319.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	107.97	1319.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74000.00	110500.00
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))..	74107.97	111819.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74107.97	111819.88

**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) .....	12150.00	116110.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12150.00	116110.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	107.97	1319.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	107.97	1319.88

**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 6 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Adolf	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 7829 E Rockhill St Ste 201	<b>Transaction ID:</b> SA11AI.7220
	City State Zip Code Wichita KS 67206	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Donation
Name of Employer IPHFHA, Inc.	Occupation Executive Director & Asst. PAC Treas.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen Chambers	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 1817 N Randall Elk City	<b>Transaction ID:</b> SA11AI.7219
	City State Zip Code Elk City OK 73644	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Donation
Name of Employer S.W. Okla Pizza Corp	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Vincent Collier	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 414 N Main #114	<b>Transaction ID:</b> SA11AI.7217
	City State Zip Code Newton KS 67114	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Donation
Name of Employer Pizza Hut of Newton	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

**A.** Full Name (Last, First, Middle Initial)  
Gerry Harper

Mailing Address P O Box 711

City State Zip Code  
Glenwood IA 51534

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

Name of Employer Occupation  
Glenwood Pizza Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** SA11AI.7221

Amount of Each Receipt this Period  
500.00

Donation

**B.** Full Name (Last, First, Middle Initial)  
Tom Harper

Mailing Address P O Box 711

City State Zip Code  
Glenwood IA 51534

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

Name of Employer Occupation  
Glenwood Pizza Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** SA11AI.7222

Amount of Each Receipt this Period  
500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
Donald K. Harty

Mailing Address 7 Butternut Tr.

City State Zip Code  
Kinneelon NJ 07405

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

Name of Employer Occupation  
ADF Pizza II, LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

**Transaction ID:** SA11AI.7215

Amount of Each Receipt this Period  
3000.00

Donation

**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 8 / 26  
(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)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

**A.**

Full Name (Last, First, Middle Initial)  
Hal II McCoy

Mailing Address 33 N Mission Rd

City State Zip Code  
Wichita KS 67206-2014

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

Name of Employer  
Restaurant Management Company

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

**Transaction ID:** SA11AI.7212

Amount of Each Receipt this Period  
1350.00

Donation

**B.**

Full Name (Last, First, Middle Initial)  
Hal Sr. McCoy

Mailing Address 3020 N Cypress Dr Ste 100

City State Zip Code  
Wichita KS 67226-4010

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

Name of Employer  
Restaurant Management Company

Occupation  
Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

**Transaction ID:** SA11AI.7210

Amount of Each Receipt this Period  
1350.00

Donation

**C.**

Full Name (Last, First, Middle Initial)  
Mike Stegman

Mailing Address 14930 Balsam

City State Zip Code  
Wichita KS 67230

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

Name of Employer  
Illinois Pizza Company

Occupation  
Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2010

**Transaction ID:** SA11AI.7218

Amount of Each Receipt this Period  
1000.00

Donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3700.00**

**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 / 26	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

<b>A.</b>	Full Name (Last, First, Middle Initial) Ted Swan		Date of Receipt	
	Mailing Address 150 N. Oliver		M M / D D / Y Y Y Y 08 / 13 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.7209
	Wichita	KS	67208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	1800.00
	Name of Employer TAS Management Inc.		Occupation Executive	Donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	1800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	12000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.7200 Date of Disbursement
	Mailing Address PO Box 4	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Wichita State KS Zip Code 67201	Amount of Each Disbursement this Period
	Purpose of Disbursement CC USAGE FEE	<input type="text" value="53.26"/>
	Candidate Name	<input type="text" value=""/>
	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) ▼
		Category/Type

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.7208 Date of Disbursement
	Mailing Address PO Box 4	<input type="text" value="08"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Wichita State KS Zip Code 67201	Amount of Each Disbursement this Period
	Purpose of Disbursement CC Usage Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text" value="001"/>
	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) ▼
		Category/Type

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.7228 Date of Disbursement
	Mailing Address PO Box 4	<input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Wichita State KS Zip Code 67201	Amount of Each Disbursement this Period
	Purpose of Disbursement CC Usage Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text" value="001"/>
	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) ▼
		Category/Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 26

<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)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 4

City Wichita State KS Zip Code 67201

Purpose of Disbursement  
analysis fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.7305

Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

4.71

SUBTOTAL of Disbursements This Page (optional) .....

4.71

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

107.97

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) ALLEN WEST FOR CONGRESS	Transaction ID: SB23.7265 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO Box 1028	Amount of Each Disbursement this Period 1000.00
	City Deerfield Beach State FL Zip Code 33443	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOOZMAN FOR ARKANSAS	Transaction ID: SB23.7280 Date of Disbursement 09 / 13 / 2010
	Mailing Address 322 NORTH BLOOMINGTON SUITE A-B	Amount of Each Disbursement this Period 2000.00
	City LOWELL State AR Zip Code 72745	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BUCK FOR COLORADO	Transaction ID: SB23.7282 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO BOX 101465	Amount of Each Disbursement this Period 5000.00
	City DENVER State CO Zip Code 80250	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) DAN COATS FOR INDIANA	Transaction ID: SB23.7289 Date of Disbursement
	Mailing Address PO BOX 301141	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City INDIANAPOLIS State IN Zip Code 46230	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="011"/> Category/ Type

B.	Full Name (Last, First, Middle Initial) DAVID VITTER FOR US SENATE	Transaction ID: SB23.7277 Date of Disbursement
	Mailing Address PO BOX 8175	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City METAIRIE State LA Zip Code 70011	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="011"/> Category/ Type

C.	Full Name (Last, First, Middle Initial) EVERY REPUBLICAN IS CRUCIAL AKA ERIC PAC	Transaction ID: SB23.7231 Date of Disbursement
	Mailing Address 4914 Fitzhugh Avenue Suite 200	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City RICHMOND State VA Zip Code 23230	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="011"/> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) FRIENDS OF DAVE REICHERT	Transaction ID: SB23.7240 Date of Disbursement
	Mailing Address P. O. Box 53322	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Bellevue State WA Zip Code 98015	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="500.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) FRIENDS OF KELLY AYOTTE	Transaction ID: SB23.7302 Date of Disbursement
	Mailing Address PO BOX 233	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City NASHUA State NH Zip Code 03061	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="3000.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT	Transaction ID: SB23.7288 Date of Disbursement
	Mailing Address PO Box 50100 PO Box 50100	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Springfield State MO Zip Code 65805	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="3000.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SCOTT DESJARLAIS

Mailing Address PO BOX 311

City JASPER State TN Zip Code 37347

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  Senate  President  
State: TN District: 04  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7248  
Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHARRON ANGLE

Mailing Address PO BOX 33058

City RENO State NV Zip Code 89533

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  Senate  President  
State: NV District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7278  
Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
JIM RENACCI FOR CONGRESS

Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 16  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7256  
Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

1000.00

**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  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) JOE MILLER FOR US SENATE	Transaction ID: SB23.7284 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO BOX 72838	Amount of Each Disbursement this Period 3000.00
	City FAIRBANKS State AK Zip Code 99707	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KANSANS FOR HUELSKAMP	Transaction ID: SB23.7273 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO Box 410	Amount of Each Disbursement this Period 500.00
	City Fowler State KS Zip Code 67844	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KELLY FOR CONGRESS	Transaction ID: SB23.7252 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO BOX 89520	Amount of Each Disbursement this Period 1000.00
	City TUCSON State AZ Zip Code 85752	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

<b>A.</b> Full Name (Last, First, Middle Initial) KIRK FOR SENATE <hr/> Mailing Address P.O. Box 8 <hr/> City Winnetka State IL Zip Code 60093 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7291 Date of Disbursement 09 / 13 / 2010
	Amount of Each Disbursement this Period 2000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) LOU BARLETTA FOR CONGRESS <hr/> Mailing Address P.O. BOX 128 <hr/> City Hazleton State PA Zip Code 18201 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7246 Date of Disbursement 09 / 13 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) LUNGREN FOR CONGRESS <hr/> Mailing Address 9321 Silverbend Lane <hr/> City Elk Grove State CA Zip Code 95624 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7238 Date of Disbursement 09 / 13 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) MAJORITY COMMITTEE PAC--MC PAC	Transaction ID: SB23.7235 Date of Disbursement																			
	Mailing Address P.O. BOX 10134	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	3		2	0	1	0												
	City BAKERSFIELD State CA Zip Code 93389	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) MARCO RUBIO FOR US SENATE	Transaction ID: SB23.7297 Date of Disbursement																			
	Mailing Address 2030 SOUTH DOUGLAS ROAD SUITE 105	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	3		2	0	1	0												
	City CORAL GABLES State FL Zip Code 33134	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00																		
3000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: FL District: 00																				

C.	Full Name (Last, First, Middle Initial) MARTHA ROBY FOR CONGRESS	Transaction ID: SB23.7260 Date of Disbursement																			
	Mailing Address PO Box 195	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	3		2	0	1	0												
	City Montgomery State AL Zip Code 36101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: AL District: 02																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00
5000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) <b>MIKE ROGERS FOR CONGRESS</b>	<b>Transaction ID: SB23.7242</b>
	Mailing Address <b>123 EAST 13TH STREET</b>	Date of Disbursement MM / DD / YYYY <b>09 / 13 / 2010</b>
	City <b>Anniston</b> State <b>AL</b> Zip Code <b>36201</b>	Amount of Each Disbursement this Period <b>500.00</b>
	Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>	<b>011</b> Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>AL</b> District: <b>03</b>	

B.	Full Name (Last, First, Middle Initial) <b>MOBROOKSFORCONGRESS.COM</b>	<b>Transaction ID: SB23.7267</b>
	Mailing Address <b>7610 FOXFIRE DRIVE</b>	Date of Disbursement MM / DD / YYYY <b>09 / 13 / 2010</b>
	City <b>HUNTSVILLE</b> State <b>AL</b> Zip Code <b>35802</b>	Amount of Each Disbursement this Period <b>1000.00</b>
	Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>	<b>011</b> Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>AL</b> District: <b>05</b>	

C.	Full Name (Last, First, Middle Initial) <b>MORAN FOR KANSAS</b>	<b>Transaction ID: SB23.7292</b>
	Mailing Address <b>PO BOX 1151</b>	Date of Disbursement MM / DD / YYYY <b>09 / 13 / 2010</b>
	City <b>HAYS</b> State <b>KS</b> Zip Code <b>67601</b>	Amount of Each Disbursement this Period <b>1000.00</b>
	Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>	<b>011</b> Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>KS</b> District: <b>00</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) <b>MULVANEY FOR CONGRESS</b>	<b>Transaction ID: SB23.7254</b>
	Mailing Address P.O. Box 1975	Date of Disbursement 09 / 13 / 2010
	City Lancaster State SC Zip Code 29721	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>PAT MEEHAN FOR CONGRESS</b>	<b>Transaction ID: SB23.7271</b>
	Mailing Address 50 S. Providence Road PO BOX 308	Date of Disbursement 09 / 13 / 2010
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>POMPEO FOR CONGRESS INC</b>	<b>Transaction ID: SB23.7275</b>
	Mailing Address PO BOX 780146	Date of Disbursement 09 / 13 / 2010
	City WICHITA State KS Zip Code 67212	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) <b>PORTMAN FOR SENATE COMMITTEE</b>	<b>Transaction ID: SB23.7296</b>
	Mailing Address <b>8331 LITTLE HARBOR DRIVE</b>	Date of Disbursement MM / DD / YYYY <b>09 / 13 / 2010</b>
	City <b>CINCINNATI</b> State <b>OH</b> Zip Code <b>45244</b>	Amount of Each Disbursement this Period <b>3000.00</b>
	Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>	<b>011</b> Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>OH</b> District: <b>00</b>	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>PROSPERITY PAC</b>	<b>Transaction ID: SB23.7236</b>
	Mailing Address <b>1006 Pendleton Street</b>	Date of Disbursement MM / DD / YYYY <b>09 / 13 / 2010</b>
	City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22314</b>	Amount of Each Disbursement this Period <b>1000.00</b>
	Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>	<b>011</b> Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>RAND PAUL FOR US SENATE</b>	<b>Transaction ID: SB23.7294</b>
	Mailing Address <b>1019 STATE STREET</b>	Date of Disbursement MM / DD / YYYY <b>09 / 13 / 2010</b>
	City <b>BOWLING GREEN</b> State <b>KY</b> Zip Code <b>42101</b>	Amount of Each Disbursement this Period <b>5000.00</b>
	Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b>	<b>011</b> Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>KY</b> District: <b>00</b>	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) RENEE ELLMERS FOR CONGRESS COMMITTEE	Transaction ID: SB23.7205 Date of Disbursement
	Mailing Address PO BOX 904	<input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City DUNN State NC Zip Code 28335	Amount of Each Disbursement this Period
	Purpose of Disbursement DONATION	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RON JOHNSON FOR SENATE INC	Transaction ID: SB23.7299 Date of Disbursement
	Mailing Address 601 OREGON STREET SUITE A	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City OSHKOSH State WI Zip Code 54902	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RON JOHNSON FOR SENATE INC	Transaction ID: SB23.7301 Date of Disbursement
	Mailing Address 601 OREGON STREET SUITE A	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City OSHKOSH State WI Zip Code 54902	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) ROSSI FOR SENATE	Transaction ID: SB23.7286 Date of Disbursement 09 / 13 / 2010
	Mailing Address PO BOX 50713	Amount of Each Disbursement this Period 5000.00
	City BELLEVUE State WA Zip Code 98015	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SANDY ADAMS FOR CONGRESS	Transaction ID: SB23.7244 Date of Disbursement 09 / 13 / 2010
	Mailing Address P. O. Box 1566	Amount of Each Disbursement this Period 1000.00
	City Orlando State FL Zip Code 32802	
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SCOTT BROWN FOR US SENATE COMMITTEE	Transaction ID: SB23.7203 Date of Disbursement 07 / 08 / 2010
	Mailing Address P.O. BOX 395	Amount of Each Disbursement this Period 1000.00
	City WRENTHAM State MA Zip Code 02903	
	Purpose of Disbursement DONATION Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) <b>SCOTT RIGELL FOR CONGRESS</b>	<b>Transaction ID: SB23.7258</b>
	Mailing Address 915 First Colonial Road Suite 100	Date of Disbursement MM / DD / YYYY 09 / 13 / 2010
	City Virginia Beach State VA Zip Code 23454	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: VA District: 02	

B.	Full Name (Last, First, Middle Initial) <b>SOUTHERLAND FOR CONGRESS</b>	<b>Transaction ID: SB23.7263</b>
	Mailing Address PO BOX 1692	Date of Disbursement MM / DD / YYYY 09 / 13 / 2010
	City LYNN HAVEN State FL Zip Code 32444	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 02	

C.	Full Name (Last, First, Middle Initial) <b>STEVE FINCHER FOR CONGRESS</b>	<b>Transaction ID: SB23.7269</b>
	Mailing Address PO BOX 11153	Date of Disbursement MM / DD / YYYY 09 / 13 / 2010
	City JACKSON State TN Zip Code 38308	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TN District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>STIVERS FOR CONGRESS</b></p> <p>Mailing Address <b>81 S FIFTH STREET</b></p> <p>City <b>COLUMBUS</b> State <b>OH</b> Zip Code <b>43215</b></p> <p>Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b></p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <b>OH</b> District: <b>15</b></p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7262</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period <b>1000.00</b></p> <p>Category/Type <b>011</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>TIBERI FOR CONGRESS</b></p> <p>Mailing Address <b>2021 EAST DUBLIN GRANVILLE ROAD SUITE 2000</b></p> <p>City <b>COLUMBUS</b> State <b>OH</b> Zip Code <b>43229</b></p> <p>Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b></p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <b>OH</b> District: <b>12</b></p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7243</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period <b>500.00</b></p> <p>Category/Type <b>011</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>TOM GANLEY FOR CONGRESS</b></p> <p>Mailing Address <b>PO BOX 41331</b></p> <p>City <b>BRECKSVILLE</b> State <b>OH</b> Zip Code <b>44141</b></p> <p>Purpose of Disbursement <b>POLITICAL CONTRIBUTION</b></p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <b>OH</b> District: <b>13</b></p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.7250</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period <b>1000.00</b></p> <p>Category/Type <b>011</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> 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 26 / 26

<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)  
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

**A.** Full Name (Last, First, Middle Initial)  
TOOMEY FOR SENATE COMMITTEE

Mailing Address 2720 JORDAN ROAD

City OREFIELD State PA Zip Code 18069

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: PA District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7298

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
WEDGE PAC

Mailing Address PO Box 680063

City Franklin State TN Zip Code 37068

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.7229

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

4000.00

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

74000.00