

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
National Funeral Directors Association of the United States Inc

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		47609.92
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	50829.92									
(c) Total Receipts (from Line 19)	24015.00	70735.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	74844.92	118344.92								
7. Total Disbursements (from Line 31)	47300.00	90800.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27544.92	27544.92								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
National Funeral Directors Association of the United States Inc

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6600.00	29475.00
(i) Itemized (use Schedule A)	17415.00	41260.00
(ii) Unitemized	24015.00	70735.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	24015.00	70735.00
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))	24015.00	70735.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24015.00	70735.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47300.00	90800.00
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))..	47300.00	90800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47300.00	90800.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	24015.00	70735.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24015.00	70735.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 25

(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

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)
National Funeral Directors Association of the United States Inc

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

Mailing Address 516 Stanton St

City Greensburg State PA Zip Code 15601-1347

FEC ID number of contributing federal political committee. C

Name of Employer: Leo M Bacha Funeral Home Inc
Occupation: Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 16 / 2008
Transaction ID: SA11AI.12447
 Amount of Each Receipt this Period 200.00

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

Mailing Address 8090 S State St

City Midvale State UT Zip Code 84047-3243

FEC ID number of contributing federal political committee. C

Name of Employer: Goff Mortuary
Occupation: Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 06 / 2008
Transaction ID: SA11AI.12583
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mark J Benson

Mailing Address 1111 25th Ave S

City Saint Cloud State MN Zip Code 56301-4833

FEC ID number of contributing federal political committee. C

Name of Employer: Benson Funeral Home
Occupation: Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2008
Transaction ID: SA11AI.12545
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 550.00

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 7 / 25
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Jeff L. Blackmer

Mailing Address 305 N Mill St

City State Zip Code
Grangeville ID 83530-1870

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

Name of Employer: Blackmer Funeral Home
Occupation: Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.12613

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
William Booker, II

Mailing Address PO Box 25440

City State Zip Code
Little Rock AR 72221-5440

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

Name of Employer: Roller Funeral Home
Occupation: Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.12702

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Rick Bostelman

Mailing Address PO Box 129

City State Zip Code
Fitzgerald GA 31750-0129

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

Name of Employer: Paulk Funeral Home Ltd
Occupation: Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.12481

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **700.00**

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 / 25
(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)
National Funeral Directors Association of the United States Inc

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

Mailing Address 19215 Northern Blvd

City State Zip Code
Flushing NY 11358-2993

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

Name of Employer Occupation
Frederick Funeral Home Inc Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

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

Transaction ID: SA11AI.12690

Amount of Each Receipt this Period
450.00

B. Full Name (Last, First, Middle Initial)
Ginger C. Caldwell

Mailing Address PO Box 630

City State Zip Code
Covington GA 30014-2420

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

Name of Employer Occupation
Caldwell & Cowan Funeral Home Inc Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11AI.12478

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Stephen P. Conte, Jr.

Mailing Address 5-06 6th Street

City State Zip Code
Fair Lawn NJ 07410

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

Name of Employer Occupation
Patrick J Conte Funeral Home Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.12743

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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 / 25
(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

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)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial)
Stephen C. Dawson

Mailing Address 9568 Belmont Ave

City State Zip Code
Franklin Park IL 60131-2707

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

Name of Employer Occupation
Sax-Tiedemann Funeral Home & Crematori Funeral Director

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

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: SA11AI.12549

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 309

City State Zip Code
Augusta GA 30903-0309

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

Name of Employer Occupation
Platt's Funeral Home Inc Funeral Director

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

Date of Receipt
MM / DD / YYYY
04 / 16 / 2008

Transaction ID: SA11AI.12480

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Shelby D. Ferguson, II

Mailing Address 700 Broad Ave

City State Zip Code
Belle Vernon PA 15012-1513

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

Name of Employer Occupation
Ferguson Funeral Home & Crematory Inc Funeral Director

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

Date of Receipt
MM / DD / YYYY
06 / 03 / 2008

Transaction ID: SA11AI.12437

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Shelby D. Ferguson, II

Mailing Address 700 Broad Ave

City State Zip Code
Belle Vernon PA 15012-1513

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

Name of Employer
Ferguson Funeral Home & Crematory Inc

Occupation
Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2008

Transaction ID: SA11AI.12438

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Roscoe Gorman

Mailing Address 1147 Cheyenne St

City State Zip Code
Douglas WY 82633

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

Name of Employer
Converse Chpl of Gorman FH

Occupation
Funeral director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2008

Transaction ID: SA11AI.12582

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Carlos R. Guerra

Mailing Address 5800 E Beverly Blvd

City State Zip Code
Los Angeles CA 90022-2898

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

Name of Employer
Guerra & Gutierrez Mortuaries

Occupation
Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2008

Transaction ID: SA11AI.12647

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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 / 25

(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

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)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Ken Knauss

Mailing Address 1325 N Main St

City State Zip Code
Las Vegas NV 89101-1097

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

Name of Employer Occupation
Palm Memorial Park & Mortuary Funeral Director

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.12444

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
David W. McComb

Mailing Address 1140 Lake Ave

City State Zip Code
Fort Wayne IN 46805-4341

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

Name of Employer Occupation
D O McComb & Sons Funeral Director

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.12696

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Warren Miller, III

Mailing Address 549 Carlisle St

City State Zip Code
Hanover PA 17331-2191

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

Name of Employer Occupation
Wetzel Funeral Home Inc Funeral Director

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.12459

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

750.00

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 / 25

(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

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)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)

Thomas Norato

Mailing Address 1278 Park Ave

City State Zip Code
Cranston RI 02910-3099

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

Name of Employer Occupation
Nardolillo Funeral Home Inc Funeral Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.12594

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Thomas P O'Connell

Mailing Address 520 S 11th St

City State Zip Code
Hudson WI 54016-2149

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

Name of Employer Occupation
O'Connell Family Funeral Homes and Cre Funeral Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.12641

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Joseph B Papavero

Mailing Address 72-27 Grand Ave

City State Zip Code
Maspeth NY 11378-1532

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

Name of Employer Occupation
Papavero Funeral Home Funeral Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.12426

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

400.00

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 / 25
(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

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)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Gary L Pomeroy

Mailing Address 6 S Howard Ave

City State Zip Code
Croswell MI 48422

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

Name of Employer Pomeroy Funeral Home Occupation Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y Y
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.12661

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Timothy E Ryan

Mailing Address 145 Saint Catherine Blvd

City State Zip Code
Toms River NJ 08755-4976

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

Name of Employer Timothy E Ryan Home for Funerals Occupation Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt M M / D D / Y Y Y Y Y
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.12552

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Ronald Strong

Mailing Address 903 Broadway Street

City State Zip Code
Hickman KY 42050

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

Name of Employer Strong Funeral Home Occupation Funeral Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.12490

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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 / 25
(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

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)
National Funeral Directors Association of the United States Inc

A.

Full Name (Last, First, Middle Initial)
Susan Tasca

Mailing Address 44 Regal Way

City Cranston State RI Zip Code 02921-2115

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

Name of Employer Woodlawn Funeral Home Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11AI.12631

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Susan Tasca

Mailing Address 44 Regal Way

City Cranston State RI Zip Code 02921-2115

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

Name of Employer Woodlawn Funeral Home Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.12629

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Susan Tasca

Mailing Address 44 Regal Way

City Cranston State RI Zip Code 02921-2115

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

Name of Employer Woodlawn Funeral Home Occupation Funeral Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.12630

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	6600.00

**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)

PAGE 15 / 25

<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)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Andy Harris For Congress	Transaction ID: SB23.12350 Date of Disbursement 06 / 24 / 2008
	Mailing Address PO Box 1527	Amount of Each Disbursement this Period 1000.00
	City Annapolis State MD Zip Code 21404	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Barrett for Congress	Transaction ID: SB23.12352 Date of Disbursement 05 / 19 / 2008
	Mailing Address PO Box 869	Amount of Each Disbursement this Period 2500.00
	City Westminster State SC Zip Code 29693	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Berkley for Congress	Transaction ID: SB23.12354 Date of Disbursement 05 / 19 / 2008
	Mailing Address PO Box 636	Amount of Each Disbursement this Period 1000.00
	City Annandale State VA Zip Code 22003	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

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)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) BOB FILNER FOR CONGRESS	Transaction ID: SB23.12355
	Mailing Address PO Box 127868	Date of Disbursement 05 / 19 / 2008
	City San Diego State CA Zip Code 92112	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Childers for Congress	Transaction ID: SB23.12357
	Mailing Address PO Box 177	Date of Disbursement 05 / 05 / 2008
	City Booneville State MS Zip Code 38829	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chris Myers For Congress	Transaction ID: SB23.12359
	Mailing Address 112 High Street	Date of Disbursement 05 / 05 / 2008
	City Mount Holly State NJ Zip Code 08060	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <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)

PAGE 17 / 25

<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)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Dave Camp For Congress 08	Transaction ID: SB23.12361 Date of Disbursement
	Mailing Address 2501 Wisconsin Ave #304	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Dave Camp For Congress 08	Transaction ID: SB23.12362 Date of Disbursement
	Mailing Address 2501 Wisconsin Ave #304	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Davis for Congress	Transaction ID: SB23.12364 Date of Disbursement
	Mailing Address 700 12th St NW Ste 700	<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 25

<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)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial) Davis for Congress Mailing Address 700 12th St NW Ste 700 City Washington State DC Zip Code 20005 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.12365 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Ensign for Senate Mailing Address PO Box 370667 City Las Vegas State NV Zip Code 89137 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.12367 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Friends of John Thune Mailing Address 912 F Street NW #1106 City Washington State DC Zip Code 20004 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.12369 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 3000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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 19 / 25

<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)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial) Gerlach for Congress <hr/> Mailing Address 700 12th St NW <hr/> City Washington State DC Zip Code 20005 Purpose of Disbursement <input type="checkbox"/> Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: SB23.12371 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Goode For Congress <hr/> Mailing Address 235 South Main Street <hr/> City Rocky Mount State VA Zip Code 24151 Purpose of Disbursement <input type="checkbox"/> Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: SB23.12373 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) HOOSIERS SUPPORTING BUYER FOR CONGRESS <hr/> Mailing Address 200 North Main St. P.O. Box 712 200 North Main St. P.O. Box 712 <hr/> City Monticello State IN Zip Code 47960 Purpose of Disbursement <input type="checkbox"/> Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: SB23.12374 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

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)

PAGE 20 / 25

<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)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Kagen for Congress	Transaction ID: SB23.12376 Date of Disbursement 04 / 28 / 2008
	Mailing Address 100 W. College Ave. Ste 50-D	Amount of Each Disbursement this Period 1000.00
	City Appleton State WI Zip Code 54911	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Matheson for Congress	Transaction ID: SB23.12378 Date of Disbursement 04 / 21 / 2008
	Mailing Address PO BOX 636	Amount of Each Disbursement this Period 1000.00
	City Annandale State VA Zip Code 22003	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) McCotter Congressional Committee	Transaction ID: SB23.12380 Date of Disbursement 04 / 07 / 2008
	Mailing Address 2800 Shirlington Rd Ste 405	Amount of Each Disbursement this Period 3000.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial) MICHIGAN REPUBLICAN PARTY <hr/> Mailing Address 520 Seymour St. <hr/> City Lansing State MI Zip Code 48933 Purpose of Disbursement <input type="text"/> <hr/> Candidate Name MICHIGAN REPUBLICAN PARTY Category/Type <input type="text"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.12382 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8	
	Amount of Each Disbursement this Period <input type="text"/> 2000.00	
	B. Full Name (Last, First, Middle Initial) Mike Michaud for Congress <hr/> Mailing Address 499 S Capitol St SW 404 <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/Type <input type="text"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.12384 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period <input type="text"/> 2500.00	
C. Full Name (Last, First, Middle Initial) Murtha For Congress Committee <hr/> Mailing Address 647 Main St Ste 200 <hr/> City Johnstown State PA Zip Code 15901 Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Category/Type <input type="text"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.12386 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 8	
Amount of Each Disbursement this Period <input type="text"/> 1000.00		

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text"/> 5500.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 25

<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)
National Funeral Directors Association of the United States Inc

A.	Full Name (Last, First, Middle Initial) Paul Ryan for Congress	Transaction ID: SB23.12388 Date of Disbursement 04 / 02 / 2008
	Mailing Address PO Box 1919	Amount of Each Disbursement this Period 1000.00
	City Janesville State WI Zip Code 53547	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B.	Full Name (Last, First, Middle Initial) Peter Hoekstra For Congress	Transaction ID: SB23.12390 Date of Disbursement 06 / 16 / 2008
	Mailing Address 1454 Cimarron Drive	Amount of Each Disbursement this Period 300.00
	City Holland State MI Zip Code 49423	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C.	Full Name (Last, First, Middle Initial) EARL RALPH POMEROY	Transaction ID: SB23.12407 Date of Disbursement 06 / 30 / 2008
	Mailing Address Post Office Box 9336	Amount of Each Disbursement this Period 2500.00
	City BISMARCK State ND Zip Code 58502	
	Purpose of Disbursement	Category/Type
	Candidate Name POMEROY FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District: 00	

SUBTOTAL of Disbursements This Page (optional) ▶

3800.00

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 23 / 25

<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)
National Funeral Directors Association of the United States Inc

<p>A. Full Name (Last, First, Middle Initial) Rogers for Congress</p> <p>Mailing Address 2800 Shirlington Road Ste 405</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.12392 Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Ross for Congress</p> <p>Mailing Address PO Box 360</p> <p>City Prescott State AR Zip Code 71857</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.12394 Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Shimkus for Congress</p> <p>Mailing Address 700 12th St NW-Ste 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.12396 Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>

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)

PAGE 24 / 25

<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)
National Funeral Directors Association of the United States Inc

<p>A. Full Name (Last, First, Middle Initial) Souder for Congress</p> <p>Mailing Address PO Box 40233</p> <p>City Fort Wayne State IN Zip Code 46804</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.12398 Date of Disbursement: 04 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Steve Austria for Congress</p> <p>Mailing Address 217 Third St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.12400 Date of Disbursement: 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Stivers For Congress</p> <p>Mailing Address 81 S Fifth Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.12402 Date of Disbursement: 06 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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)

PAGE 25 / 25

<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)
National Funeral Directors Association of the United States Inc

A. Full Name (Last, First, Middle Initial)
The Committee to Elect Lou Radkowski

Mailing Address PO Box 261

City State Zip Code
St. Marys PA 15857

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB23.12404
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Wally Herger For Congress

Mailing Address PO Box 16021

City State Zip Code
Alexandria VA 22302

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB23.12406
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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