

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

HUCK PAC

ADDRESS (number and street) PO BOX 2008

Check if different than previously reported. (ACC) LITTLE ROCK AR 72203

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00448373

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports:
- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post -Election Report for the:

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on 11 04 2008 in the State of \_\_\_\_\_

5. Covering Period 10 16 2008 through 11 24 2008

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

Type or Print Name of Treasurer Bryan Jeffrey

Signature of Treasurer Electronically Filed by Bryan Jeffrey Date 03 14 2009

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

Office Use Only								
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
HUCK PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

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		0.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	141844.84									
(c) Total Receipts (from Line 19) .....	139081.37	794147.85								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	280926.21	794147.85								
7. Total Disbursements (from Line 31) .....	179424.21	692645.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	101502.00	101502.00								
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) .....	30000.00									

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**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
HUCK PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

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	66362.47	415792.42
(i) Itemized (use Schedule A) .....	71338.72	372936.57
(ii) Unitemized .....	137701.19	788728.99
(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) .....	137701.19	788728.99
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) .....	1380.18	3788.86
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	1630.00
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)) .....	139081.37	794147.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	139081.37	794147.85

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	170924.21	640850.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	170924.21	640850.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	35793.61
24. Independent Expenditure (use Schedule E) .....	5000.00	5000.00
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 .....	2500.00	2569.03
(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)) .....	2500.00	2569.03
29. Other Disbursements.....	1000.00	8432.50
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))..	179424.21	692645.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	179424.21	692645.85

**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) .....	137701.19	788728.99
34. Total Contribution Refunds (from Line 28(d)) .....	2500.00	2569.03
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	135201.19	786159.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	170924.21	640850.71
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1380.18	3788.86
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	169544.03	637061.85

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 119  
(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)  
**HUCK PAC**

**A.**

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">10 / 16 / 2008</span>
Mailing Address 1690 S. Walnut Drive		<b>Transaction ID:</b> SA11AI.24042
City <b>Warsaw</b>	State <b>IN</b>	Zip Code <b>46580</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5.00</span>
Name of Employer Refior Law Office	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">273.23</span>	

**B.**

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">10 / 17 / 2008</span>
Mailing Address 1690 S. Walnut Drive		<b>Transaction ID:</b> SA11AI.24084
City <b>Warsaw</b>	State <b>IN</b>	Zip Code <b>46580</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5.00</span>
Name of Employer Refior Law Office	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">278.23</span>	

**C.**

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">10 / 19 / 2008</span>
Mailing Address 1690 S. Walnut Drive		<b>Transaction ID:</b> SA11AI.24111
City <b>Warsaw</b>	State <b>IN</b>	Zip Code <b>46580</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5.00</span>
Name of Employer Refior Law Office	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">283.23</span>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">15.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Shelley Ahlersmeyer

Mailing Address 1690 S. Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.23

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

**Transaction ID:** SA11AI.24300

Amount of Each Receipt this Period 5.00

**B.**

Full Name (Last, First, Middle Initial)  
Shelley Ahlersmeyer

Mailing Address 1690 S. Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.23

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 3 / 2 0 0 8

**Transaction ID:** SA11AI.24705

Amount of Each Receipt this Period 5.00

**C.**

Full Name (Last, First, Middle Initial)  
Shelley Ahlersmeyer

Mailing Address 1690 S. Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.23

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

**Transaction ID:** SA11AI.24773

Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 20.00

**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 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Shelley Ahlersmeyer  
 Mailing Address 1690 S. Walnut Drive  
 City Warsaw State IN Zip Code 46580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Refior Law Office Occupation Paralegal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 328.23  
 Date of Receipt 10 / 31 / 2008  
**Transaction ID:** SA11AI.26436  
 Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
James L. Amos  
 Mailing Address P.O. Box 807  
 City Chestertown State MD Zip Code 21620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Photographer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.08  
 Date of Receipt 10 / 31 / 2008  
**Transaction ID:** SA11AI.26405  
 Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Carl T. Anderson  
 Mailing Address 3729 E. Nance Circle  
 City Mesa State AZ Zip Code 85215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Living Word Bible Occupation Pastor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00  
 Date of Receipt 10 / 24 / 2008  
**Transaction ID:** SA11AI.28562  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 625.00  
**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 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1655.08

Date of Receipt: 10 / 18 / 2008  
Transaction ID: SA11AI.24092  
Amount of Each Receipt this Period: 10.00

**B.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1665.08

Date of Receipt: 10 / 21 / 2008  
Transaction ID: SA11AI.24404  
Amount of Each Receipt this Period: 10.00

**C.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1675.08

Date of Receipt: 10 / 24 / 2008  
Transaction ID: SA11AI.24726  
Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1685.08

Date of Receipt: 10 / 28 / 2008  
**Transaction ID: SA11AI.25393**  
 Amount of Each Receipt this Period: 10.00

**B.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1695.08

Date of Receipt: 10 / 30 / 2008  
**Transaction ID: SA11AI.25802**  
 Amount of Each Receipt this Period: 10.00

**C.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.08

Date of Receipt: 11 / 01 / 2008  
**Transaction ID: SA11AI.26604**  
 Amount of Each Receipt this Period: 5.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25.00

**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 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1705.08

Date of Receipt: 11 / 03 / 2008  
**Transaction ID:** SA11AI.26705  
 Amount of Each Receipt this Period: 5.00

**B.** Full Name (Last, First, Middle Initial)  
David E. Anderson

Mailing Address 9026 Manordale Lane

City State Zip Code  
Ellicott City MD 21042

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

Name of Employer: National Institutes of Health  
Occupation: Research Physiologist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1715.08

Date of Receipt: 11 / 04 / 2008  
**Transaction ID:** SA11AI.27109  
 Amount of Each Receipt this Period: 10.00

**C.** Full Name (Last, First, Middle Initial)  
Jill Anderson

Mailing Address 3109 Blueberry Trail

City State Zip Code  
Granbury TX 76048

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

Name of Employer:  
Occupation: Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 368.18

Date of Receipt: 10 / 29 / 2008  
**Transaction ID:** SA11AI.25489  
 Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 119
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Joe Anderson	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8
	Mailing Address 2221 Llangeler Dr	<b>Transaction ID:</b> SA11AI.28095
	City State Zip Code Ruston LA 71270	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Nadel & Gussman District Manager	
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) Maureen Anderson	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	Mailing Address 3729 E. Nance Circle	<b>Transaction ID:</b> SA11AI.28564
	City State Zip Code Mesa AZ 85215	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Living Word Bible Associate Pastor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kristen Andrews	Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 8
	Mailing Address 3100 Finnian Way	<b>Transaction ID:</b> SA11AI.27234
	City State Zip Code Dublin CA 94568	Amount of Each Receipt this Period 17.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Ultimate Staffing Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1517.88
<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 13 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
David Bacon

Mailing Address 3246 Michael Drive

City State Zip Code  
Saint Charles MO 63301

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

Name of Employer Occupation  
Nova Business Systems, In- Software Engineer  
c.

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

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

**Transaction ID:** SA11AI.24089

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Bobai Bahk

Mailing Address 171 Moultrie Street  
MSC 96

City State Zip Code  
Charleston SC 29409

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

Name of Employer Occupation  
The Citadel Library Specialist

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 430.08

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.26712

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Terry Baugh

Mailing Address 204 Parkwood Blvd

City State Zip Code  
West Monroe LA 71292

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

Name of Employer Occupation  
D & J Construction Company CFO

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

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

**Transaction ID:** SA11AI.28104

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Martha L. Beall  
Mailing Address P.O. Box 768  
City Alpharetta State GA Zip Code 30009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11AI.28556  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
John Beebe  
Mailing Address 203 Neel St.  
City El Dorado State AR Zip Code 71730  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.27946  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Tracy Bischof  
Mailing Address 6110 W. Hedgehog Place  
City Phoenix State AZ Zip Code 85083  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Signature Dental Studio Occupation Dental Technician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 490.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.25075  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1225.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Tracy Bischof

Mailing Address 6110 W. Hedgehog Place

City State Zip Code  
Phoenix AZ 85083

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

Name of Employer Occupation  
Signature Dental Studio Dental Technician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** SA11AI.26434

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Carole Blanchard

Mailing Address 791 Lake Avenue

City State Zip Code  
Clermont FL 34711

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

Name of Employer Occupation  
Orange County Public Schools Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

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

**Transaction ID:** SA11AI.28331

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Norland Bolen

Mailing Address 7212 Pecatonica Rd

City State Zip Code  
Leaf River IL 61047

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

Name of Employer Occupation  
Valley Header Die, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** SA11AI.28484

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **630.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Peggy C. Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3050.00

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.27816

Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Peggy C. Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 11 / 03 / 2008

Transaction ID: SA11AI.27940

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Bowie

Mailing Address 516 Ridgeview Dr

City Jasper State AL Zip Code 35504

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

Name of Employer Occupation Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.08

Date of Receipt 10 / 29 / 2008

Transaction ID: SA11AI.25482

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 119
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard Bowie

Mailing Address 516 Ridgeview Dr

City Jasper State AL Zip Code 35504

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

Name of Employer Bowie's Pharmacy Occupation Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.08

Date of Receipt 10 / 29 / 2008

Transaction ID: SA11AI.27878

Amount of Each Receipt this Period 60.00

**B.** Full Name (Last, First, Middle Initial)  
Mike Boyer

Mailing Address 382 Beechcrest

City Austintown State OH Zip Code 44515

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

Name of Employer Boyer Home Improvement Occupation Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2008

Transaction ID: SA11AI.25236

Amount of Each Receipt this Period 19.72

**C.** Full Name (Last, First, Middle Initial)  
Mike Boyer

Mailing Address 382 Beechcrest

City Austintown State OH Zip Code 44515

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

Name of Employer Boyer Home Improvement Occupation Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2008

Transaction ID: SA11AI.25859

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 129.72

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial) Mike Boyer		Date of Receipt MM / DD / YYYY 11 / 08 / 2008
Mailing Address 382 Beechcrest		<b>Transaction ID:</b> SA11AI.27643
City Austintown	State OH	Zip Code 44515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.08
Name of Employer Boyer Home Improvement	Occupation Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.08	

**B.**

Full Name (Last, First, Middle Initial) Louis Brandt		Date of Receipt MM / DD / YYYY 11 / 10 / 2008
Mailing Address 3104 Edloe St Suite 200		<b>Transaction ID:</b> SA11AI.28529
City Houston	State TX	Zip Code 77027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Regina Brown		Date of Receipt MM / DD / YYYY 10 / 25 / 2008
Mailing Address 10233 130th Street N		<b>Transaction ID:</b> SA11AI.24796
City Largo	State FL	Zip Code 33774
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Atlantic Funding Group, Inc.	Occupation Financial Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	540.08
<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 19 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial) Sharon Brown		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
Mailing Address 2990 1st Avenue NW		<b>Transaction ID:</b> SA11AI.24727
City Hickory	State NC	Zip Code 28601
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 110.00
Name of Employer Elite Properties	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.16	

**B.**

Full Name (Last, First, Middle Initial) Sharon Brown		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address 2990 1st Avenue NW		<b>Transaction ID:</b> SA11AI.25852
City Hickory	State NC	Zip Code 28601
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 70.00
Name of Employer Elite Properties	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.16	

**C.**

Full Name (Last, First, Middle Initial) Sharon Brown		Date of Receipt MM / DD / YYYY 10 / 31 / 2008
Mailing Address 2990 1st Avenue NW		<b>Transaction ID:</b> SA11AI.26211
City Hickory	State NC	Zip Code 28601
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer Elite Properties	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.16	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	200.00
<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 20 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Sharon Brown

Mailing Address 2990 1st Avenue NW

City State Zip Code  
Hickory NC 28601

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

Name of Employer Elite Properties Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.16

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

**Transaction ID:** SA11AI.27217

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Sharon Brown

Mailing Address 2990 1st Avenue NW

City State Zip Code  
Hickory NC 28601

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

Name of Employer Elite Properties Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.24

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

**Transaction ID:** SA11AI.28653

Amount of Each Receipt this Period  
20.08

**C.**

Full Name (Last, First, Middle Initial)  
Sharon Brown

Mailing Address 2990 1st Avenue NW

City State Zip Code  
Hickory NC 28601

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

Name of Employer Elite Properties Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.24

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

**Transaction ID:** SA11AI.28690

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **65.08**

**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 21 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Bill Burney  
 Mailing Address 3480 Tyler Street  
 City State Zip Code  
 Conway AR 72034  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 9 / 2 0 0 8  
**Transaction ID:** SA11AI.25484  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Conway Glass, Inc. Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Lorna Call  
 Mailing Address P O Box 309  
 City State Zip Code  
 Tustin CA 92781  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8  
**Transaction ID:** SA11AI.28144  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**C.** Full Name (Last, First, Middle Initial)  
April Caswell  
 Mailing Address 814 Victoria Lane  
 City State Zip Code  
 O'Fallon IL 62269  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8  
**Transaction ID:** SA11AI.26969  
 Amount of Each Receipt this Period  
 20.08  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 245.08

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1020.08  
**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 22 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Cates

Mailing Address 1028 S. 26th Street

City State Zip Code  
Corsicana TX 75110

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

Name of Employer Occupation  
Sanchez Comm. Security Security Guard

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 294.67

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

**Transaction ID:** SA11AI.25138

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Cates

Mailing Address 1028 S. 26th Street

City State Zip Code  
Corsicana TX 75110

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

Name of Employer Occupation  
Sanchez Comm. Security Security Guard

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.67

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.26181

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Doug Coberley

Mailing Address 4150 Citrus Street

City State Zip Code  
Kissimmee FL 34746

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

Name of Employer Occupation  
B & C Contracting Company Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** SA11AI.26418

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **520.00**

**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 23 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Donad R. Cody  
Mailing Address 159 Amason St.  
City Calion State AR Zip Code 71724  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.25805  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Kenneth Cooper  
Mailing Address 6564 Valleybrook Dr  
City Dallas State TX Zip Code 75254  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 11 / 10 / 2008  
Transaction ID: SA11AI.28533  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Marshall Cooper  
Mailing Address 35 Anderson Rd  
City Greenwich State CT Zip Code 06830  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Entrepreneur  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.27910  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**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 24 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Marcia V. Dalsky

Mailing Address E5851 Sunrise Rd

City Wausau State WI Zip Code 54403

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 271.08

Date of Receipt 10 / 20 / 2008

Transaction ID: SA11AI.24241

Amount of Each Receipt this Period 20.08

**B.** Full Name (Last, First, Middle Initial)  
Lawrence Danna

Mailing Address 108 Contempo Ave

City West Monroe State LA Zip Code 71291

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

Name of Employer Occupation Otolaryngologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 29 / 2008

Transaction ID: SA11AI.28108

Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Willie K. Davis

Mailing Address 4003 Vailwood Drive

City Nashville State TN Zip Code 37215

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.28571

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2020.08

**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 25 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Steven Davison

Mailing Address 2430 Victory Park Ln  
Unit 2204

City Dallas State TX Zip Code 75219

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

Name of Employer Genesis Energy Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA11AI.28110

Amount of Each Receipt this Period  
2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Abel de la Rosa

Mailing Address 6612 E. Encanto Street

City Mesa State AZ Zip Code 85205

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

Name of Employer Occupation Disabled

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

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

Transaction ID: SA11AI.24444

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Abel de la Rosa

Mailing Address 6612 E. Encanto Street

City Mesa State AZ Zip Code 85205

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

Name of Employer Occupation Disabled

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.26179

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2150.00

**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 26 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Abel de la Rosa  
Mailing Address 6612 E. Encanto Street  
City Mesa State AZ Zip Code 85205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Disabled  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 455.00  
Date of Receipt 11 / 15 / 2008  
Transaction ID: SA11AI.27399  
Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Harold Dobbs  
Mailing Address 2678 Pine Acres Road  
City Pike Road State AL Zip Code 36064  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.24255  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Harold Dobbs  
Mailing Address 2678 Pine Acres Road  
City Pike Road State AL Zip Code 36064  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.25702  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 280.00  
**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 27 / 119

(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Harold Dobbs

Mailing Address 2678 Pine Acres Road

City State Zip Code  
Pike Road AL 36064

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.26917

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Duffield

Mailing Address 641 NE Newport Drive

City State Zip Code  
Lees Summit MO 64064

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

Name of Employer Occupation  
Homemaker

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

Date of Receipt

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

Transaction ID: SA11AI.25437

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Nancy Duffield

Mailing Address 641 NE Newport Drive

City State Zip Code  
Lees Summit MO 64064

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.26175

Amount of Each Receipt this Period  
1500.00

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

3050.00

**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 28 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Nancy Duffield  
 Mailing Address 641 NE Newport Drive  
 City State Zip Code  
 Lees Summit MO 64064  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 3 1 / 2 0 0 8  
**Transaction ID:** SA11AI.26495  
 Amount of Each Receipt this Period  
 2000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Stephen Duft  
 Mailing Address 1103 N. 2nd  
 City State Zip Code  
 Clinton MO 64735  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 3 1 / 2 0 0 8  
**Transaction ID:** SA11AI.26248  
 Amount of Each Receipt this Period  
 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Duft Accounting Accountant-Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 205.00

**C.** Full Name (Last, First, Middle Initial)  
Jack Dye  
 Mailing Address 1166 Lafayette Rd  
 B-14  
 City State Zip Code  
 Medina OH 44256  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 9 / 2 0 0 8  
**Transaction ID:** SA11AI.28288  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Medina County Commissions Bus Driver  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2525.00  
**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 29 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kristy Estes

Mailing Address 2113 Alameda Drive

City Pekin State IL Zip Code 61554

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

Name of Employer Peoria Christian School Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2008

Transaction ID: SA11AI.26559

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Jim Finley

Mailing Address 201 Tremont Dr

City Ruston State LA Zip Code 71270

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

Name of Employer Self-Employed Occupation Orthopedic Surgeon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2008

Transaction ID: SA11AI.27937

Amount of Each Receipt this Period 500.00

**C.**

Full Name (Last, First, Middle Initial)  
Patty Flinchum

Mailing Address P.O. Box 3635

City Somerset State KY Zip Code 42564

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

Name of Employer Terry W Flinchum, CPA Occupation Certified Public Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 21 / 2008

Transaction ID: SA11AI.24488

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 119
	<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)  
HUCK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) John Ford	Date of Receipt MM / DD / YYYY 10 / 29 / 2008
	Mailing Address 5537 Hamstead Crossing Drive	<b>Transaction ID:</b> SA11AI.25547
	City State Zip Code Raleigh NC 27612	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation ADT Security Services Sales Rep. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Donald Frueh	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 311 Twin Oaks Drive	<b>Transaction ID:</b> SA11AI.25999
	City State Zip Code Havertown PA 19083	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Ardmore Banking Advisors, Inc. Banking Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Carole Genatt	Date of Receipt MM / DD / YYYY 11 / 13 / 2008
	Mailing Address 280 Sweetmans Lane	<b>Transaction ID:</b> SA11AI.27728
	City State Zip Code Millstone Township NJ 08535	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Real Estate Rentals Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 362.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	137.50
<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 31 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rich Giddings

Mailing Address 7529 S. Power Road

City State Zip Code  
Queen Creek AZ 85242

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

Name of Employer Occupation  
REMAX Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.26064

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Marilyn Glaser

Mailing Address 2413 Gunnison Trail

City State Zip Code  
Flower Mound TX 75028

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.26641

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Glass

Mailing Address 2501 FM 2794 A

City State Zip Code  
Spur TX 79370

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

Name of Employer Occupation  
Self-Employed Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.25837

Amount of Each Receipt this Period  
100.00

**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 32 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert Glass  
 Mailing Address 2501 FM 2794 A  
 City State Zip Code  
Spur TX 79370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation  
Rancher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8  
**Transaction ID:** SA11AI.27045  
 Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Goldsby, Jr.  
 Mailing Address P.O. Box 2017  
 City State Zip Code  
West Memphis AR 72303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation  
Farming/Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8  
**Transaction ID:** SA11AI.27870  
 Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Carl Green  
 Mailing Address 541 Pinehaven Drive  
 City State Zip Code  
Houston TX 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
C.E. Green & Co. Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 8  
**Transaction ID:** SA11AI.26412  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00  
**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 33 / 119

(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)  
HUCK PAC

**A.**

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

Mailing Address 2426 Mimosa Circle

City State Zip Code  
Rio Grande City TX 78582

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

Name of Employer Occupation  
Broken Papatote Enterprise PA Physician

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: SA11AI.26028

Amount of Each Receipt this Period

1000.00
---------

**B.**

Full Name (Last, First, Middle Initial)  
Mary Hackerman

Mailing Address 3402 Ella Lee Ln

City State Zip Code  
Houston TX 77027

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

Name of Employer Occupation  
Homemaker

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

Date of Receipt

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

Transaction ID: SA11AI.28527

Amount of Each Receipt this Period

500.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
Marvin Hadenfeldt

Mailing Address 5720 Denali Street

City State Zip Code  
Anchorage AK 99518

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

Name of Employer Occupation  
Anchorage School District Special Education Teacher

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.62

Date of Receipt

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

Transaction ID: SA11AI.24189

Amount of Each Receipt this Period

10.00
-------

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

1510.00
---------

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

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Marvin Hadenfeldt

Mailing Address 5720 Denali Street

City Anchorage State AK Zip Code 99518

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

Name of Employer Anchorage School District Occupation Special Education Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.62

Date of Receipt: 10 / 21 / 2008  
**Transaction ID:** SA11AI.24452  
 Amount of Each Receipt this Period: 5.00

**B.**

Full Name (Last, First, Middle Initial)  
Marvin Hadenfeldt

Mailing Address 5720 Denali Street

City Anchorage State AK Zip Code 99518

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

Name of Employer Anchorage School District Occupation Special Education Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.62

Date of Receipt: 10 / 27 / 2008  
**Transaction ID:** SA11AI.24947  
 Amount of Each Receipt this Period: 10.00

**C.**

Full Name (Last, First, Middle Initial)  
Marvin Hadenfeldt

Mailing Address 5720 Denali Street

City Anchorage State AK Zip Code 99518

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

Name of Employer Anchorage School District Occupation Special Education Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.62

Date of Receipt: 10 / 30 / 2008  
**Transaction ID:** SA11AI.25976  
 Amount of Each Receipt this Period: 10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25.00

**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 35 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial) Marvin Hadenfeldt		Date of Receipt MM / DD / YYYY 11 / 03 / 2008
Mailing Address 5720 Denali Street		<b>Transaction ID:</b> SA11AI.26938
City Anchorage	State AK	Zip Code 99518
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
Name of Employer Anchorage School District	Occupation Special Education Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.62	

**B.**

Full Name (Last, First, Middle Initial) David Hafford		Date of Receipt MM / DD / YYYY 10 / 27 / 2008
Mailing Address 8011 Crosscreek Trail		<b>Transaction ID:</b> SA11AI.25191
City Pfafftown	State NC	Zip Code 27040
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.08	

**C.**

Full Name (Last, First, Middle Initial) David Hafford		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address 8011 Crosscreek Trail		<b>Transaction ID:</b> SA11AI.26144
City Pfafftown	State NC	Zip Code 27040
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.08	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>210.00</b>
<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 36 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Myrtle Hamlet

Mailing Address 33 N Ash St  
Apt. 203A

City Casper State WY Zip Code 82601

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.28048  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Barbara Hemphill

Mailing Address 467 Lake Eva Marie Drive

City Raleigh State NC Zip Code 27603

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

Name of Employer Occupation Consultant  
Paper Tiger Productivity Institute

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2008  
Transaction ID: SA11AI.24700  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
J.J. Henry

Mailing Address P.O. Box 22-28

City Bangkok, Thailand State ZZ Zip Code 10220

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 233.00

Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.28692  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 450.00

**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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 37 / 119
	<input checked="" 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)  
HUCK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Julie Hilgers		Date of Receipt																					
	Mailing Address 4935 Hidden Meadows Lane		<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>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	6		2	0	0	8														
	City State Zip Code Eureka CA 95503		<b>Transaction ID:</b> SA11AI.24057																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5.00																						
Name of Employer James P. Hilgers, DDS		Occupation Dental Hygenist																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 332.57																						

<b>B.</b>	Full Name (Last, First, Middle Initial) Julie Hilgers		Date of Receipt																					
	Mailing Address 4935 Hidden Meadows Lane		<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>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	9		2	0	0	8														
	City State Zip Code Eureka CA 95503		<b>Transaction ID:</b> SA11AI.24112																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5.00																						
Name of Employer James P. Hilgers, DDS		Occupation Dental Hygenist																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.57																						

<b>C.</b>	Full Name (Last, First, Middle Initial) Julie Hilgers		Date of Receipt																					
	Mailing Address 4935 Hidden Meadows Lane		<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>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	0		2	0	0	8														
	City State Zip Code Eureka CA 95503		<b>Transaction ID:</b> SA11AI.24261																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5.00																						
Name of Employer James P. Hilgers, DDS		Occupation Dental Hygenist																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 342.57																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15.00
<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 38 / 119  
(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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer James P. Hilgers, DDS Occupation Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 347.57

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.24697

Amount of Each Receipt this Period  
5.00

**B.** Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer James P. Hilgers, DDS Occupation Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 357.57

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

Transaction ID: SA11AI.24804

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer James P. Hilgers, DDS Occupation Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 367.57

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

Transaction ID: SA11AI.25406

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25.00

**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 39 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer James P. Hilgers, DDS Occupation Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 377.57

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.26119

Amount of Each Receipt this Period  
10.00

**B.**

Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer James P. Hilgers, DDS Occupation Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 387.57

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

**Transaction ID:** SA11AI.26668

Amount of Each Receipt this Period  
10.00

**C.**

Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer James P. Hilgers, DDS Occupation Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 397.57

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.26717

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30.00

**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 40 / 119

(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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Julie Hilgers

Mailing Address 4935 Hidden Meadows Lane

City State Zip Code  
Eureka CA 95503

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

Name of Employer Occupation  
James P. Hilgers, DDS Dental Hygenist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 407.57

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2008

**Transaction ID:** SA11AI.27106

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Anna Hoaglan

Mailing Address 18664 NE Woodinville-Duvall Road

City State Zip Code  
Woodinville WA 98077

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2008

**Transaction ID:** SA11AI.25964

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Anna Hoaglan

Mailing Address 18664 NE Woodinville-Duvall Road

City State Zip Code  
Woodinville WA 98077

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
11 / 03 / 2008

**Transaction ID:** SA11AI.26902

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 60.00

**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 41 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Jerry H. Hodge

Mailing Address 320 S. Polk Ste. 100

City Amarillo State TX Zip Code 79101

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

Name of Employer Maxor National Pharmacy Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.28569

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Steve Hotze

Mailing Address 20214 Braidwood Dr Suite 215

City Katy State TX Zip Code 77450

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

Name of Employer Hotze Entities Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 10 / 2008

Transaction ID: SA11AI.28523

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
John Howard

Mailing Address 2270 N. Tropical Trail

City Merritt Island State FL Zip Code 32953

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2008

Transaction ID: SA11AI.25298

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2050.00

**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 42 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert Hudson, III

Mailing Address 115 Parkside Drive

City State Zip Code  
Brandon MS 39042

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

Name of Employer Occupation  
Koch Foods of MS, LLC. Human Resources Manager

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.26492

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Judith Hynds

Mailing Address 1409 Linwood Lane

City State Zip Code  
Fort Worth TX 76134

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

Name of Employer Occupation  
Self-Employed Midwife

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

Date of Receipt

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

Transaction ID: SA11AI.24606

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Julian Irby

Mailing Address 3520 Briarcliff Drive

City State Zip Code  
Pensacola FL 32505

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.08

Date of Receipt

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

Transaction ID: SA11AI.24144

Amount of Each Receipt this Period

50.00

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

850.00

**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 43 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
David Jankovich  
 Mailing Address 163 Stonehenge Terrace  
 City State Zip Code  
 Clark NJ 07066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Multiplex, Inc. Occupation Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00  
 Date of Receipt 11 / 03 / 2008  
**Transaction ID:** SA11AI.27001  
 Amount of Each Receipt this Period 25.89

**B.** Full Name (Last, First, Middle Initial)  
Thomas Drake Jarman  
 Mailing Address 5405 Stanford Drive  
 City State Zip Code  
 Nashville TN 37215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Huck PAC Occupation Finance Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00  
 Date of Receipt 11 / 18 / 2008  
**Transaction ID:** SA11AI.28618  
 Amount of Each Receipt this Period 203.00

**C.** Full Name (Last, First, Middle Initial)  
R. G. Jarrell, Jr.  
 Mailing Address 2102 Redwood Dr  
 City State Zip Code  
 Monroe LA 71201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt 11 / 03 / 2008  
**Transaction ID:** SA11AI.27939  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1228.89  
**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 44 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Dean Johnson

Mailing Address 38150 North Avenue

City State Zip Code  
Zephyrhills FL 33542

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

Name of Employer: Dean Johnson's Music, Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.25676  
Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
David Jones

Mailing Address 6567 Ashby Grove Loop

City State Zip Code  
Haymarket VA 20169

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

Name of Employer: St. Paul's Episcopal Church Occupation: Minister

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 01 / 2008  
Transaction ID: SA11AI.26646  
Amount of Each Receipt this Period: 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Melba Jones

Mailing Address 216 Keeneland Ct

City State Zip Code  
Choudrant LA 71227

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

Name of Employer: Self-Employed Occupation: CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.27877  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00

**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 45 / 119  
(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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Fred Keith, Jr.  
Mailing Address 3266 Laramie Dr, NW

City	State	Zip Code
Vinings	GA	30339

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

Name of Employer Atlanta Bonded Warehouse Corp.	Occupation President
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 10 / 2008  
**Transaction ID:** SA11AI.28495  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Kelley  
Mailing Address 2200 Eastwood Dr

City	State	Zip Code
Richardson	TX	75080

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

Name of Employer E L B enterprises	Occupation President of Operations
---------------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.08

Date of Receipt: 10 / 30 / 2008  
**Transaction ID:** SA11AI.25983  
 Amount of Each Receipt this Period: 200.00

**C.** Full Name (Last, First, Middle Initial)  
Edward Kelly  
Mailing Address 157 R. L. Hoyle lane

City	State	Zip Code
Vale	NC	28168

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

Name of Employer	Occupation Retired
------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 11 / 03 / 2008  
**Transaction ID:** SA11AI.28132  
 Amount of Each Receipt this Period: 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<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 46 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kyungae Kim

Mailing Address 19486 E. 58th Circle

City State Zip Code  
Aurora CO 80019

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

Name of Employer Occupation  
University of Colorado Ho- Medical Technologist  
spital

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt

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

Transaction ID: SA11AI.26592

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Kyungae Kim

Mailing Address 19486 E. 58th Circle

City State Zip Code  
Aurora CO 80019

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

Name of Employer Occupation  
University of Colorado Ho- Medical Technologist  
spital

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

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.26784

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeff King

Mailing Address 8250 Boyle Parkway

City State Zip Code  
Twinsburg OH 44087

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

Name of Employer Occupation  
SSP Manager

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

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.26947

Amount of Each Receipt this Period

50.00

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

250.00

**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 47 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jeff King

Mailing Address 8250 Boyle Parkway

City State Zip Code  
Twinsburg OH 44087

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

Name of Employer Occupation  
SSP Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: SA11AI.27679

Amount of Each Receipt this Period

50.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
Harold Lancaster

Mailing Address P O Box 1398

City State Zip Code  
Mountain View AR 72560

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

Name of Employer Occupation  
Retired

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

Date of Receipt

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

Transaction ID: SA11AI.28482

Amount of Each Receipt this Period

500.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
Virginia Lattig

Mailing Address 423 Fox Chase Road

City State Zip Code  
Wirtz VA 24184

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

Name of Employer Occupation  
Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.25971

Amount of Each Receipt this Period

50.00
-------

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

600.00
--------

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

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

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

FOR LINE NUMBER: PAGE 48 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Lewis

Mailing Address 124 Thrus Avenue

City State Zip Code  
Pekin IL 61554

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

Name of Employer Home School Enrichment, Inc. Occupation Editor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

**Transaction ID:** SA11AI.26636

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Dan Lindenman

Mailing Address 14808 Fonthill Avenue

City State Zip Code  
Hawthorne CA 90250

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

Name of Employer Northrop Grumman Occupation Mechanical Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

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

**Transaction ID:** SA11AI.24973

Amount of Each Receipt this Period  
215.00

**C.** Full Name (Last, First, Middle Initial)  
John Lindsey

Mailing Address 2001 Kirby Dr Suite 1100

City State Zip Code  
Houston TX 77019

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

Name of Employer Self-Employed Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID:** SA11AI.28525

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1315.00

**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 49 / 119

(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Gail London

Mailing Address 3 Delra Lane

City State Zip Code  
Yorktown Heights NY 10598

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

Name of Employer Occupation  
Somers School District Food Service worker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 361.00

Date of Receipt

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

Transaction ID: SA11AI.25398

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)  
Gail London

Mailing Address 3 Delra Lane

City State Zip Code  
Yorktown Heights NY 10598

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

Name of Employer Occupation  
Somers School District Food Service worker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 411.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.26228

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
John Loveless

Mailing Address 8003 Sunrise Circle

City State Zip Code  
Frederick CO 80516

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

Name of Employer Occupation  
Self-Employed Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.25938

Amount of Each Receipt this Period

100.00

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

160.00

**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 50 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
G.D. Madden

Mailing Address 10821 Orleans Court

City State Zip Code  
Oklahoma City OK 73170

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

Name of Employer Requested Occupation  
BOD and Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** SA11AI.24843

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Marceau

Mailing Address 215 Tomahawk Trail

City State Zip Code  
Hill Country Villa TX 78232

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

Name of Employer Indacon, Inc. Occupation  
Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

**Transaction ID:** SA11AI.24707

Amount of Each Receipt this Period  
1000.00

**C.**

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

Mailing Address P.O. Box 911

City State Zip Code  
Burnsville MN 55306

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

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

**Transaction ID:** SA11AI.24572

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**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 51 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Maya Maughmer

Mailing Address 305 Deacon

City Euless State TX Zip Code 76039

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.24

Date of Receipt 10 / 31 / 2008

Transaction ID: SA11AI.26252

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Maya Maughmer

Mailing Address 305 Deacon

City Euless State TX Zip Code 76039

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.32

Date of Receipt 11 / 04 / 2008

Transaction ID: SA11AI.27116

Amount of Each Receipt this Period 20.08

**C.**

Full Name (Last, First, Middle Initial)  
William McKee

Mailing Address 9350 S. 67 East Avenue

City Tulsa State OK Zip Code 74133

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2008

Transaction ID: SA11AI.25219

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 170.08

**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 52 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
William McKee

Mailing Address 9350 S. 67 East Avenue

City State Zip Code  
Tulsa OK 74133

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 8

**Transaction ID:** SA11AI.27322

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph McLaughlin

Mailing Address 12 Colonial Lane

City State Zip Code  
Riverside CT 06878

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

Name of Employer Occupation  
Sidley Austin, LLP Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 8

**Transaction ID:** SA11AI.27730

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Dave McNeal

Mailing Address 541 Pollock Road

City State Zip Code  
Delaware OH 43015

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

Name of Employer Occupation  
Self-Employed Systems Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.26067

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **625.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 119
	<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)  
HUCK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark Medlin	Date of Receipt MM / DD / YYYY 10 / 18 / 2008
	Mailing Address 720 Holland Road	<b>Transaction ID:</b> SA11AI.24110
	City State Zip Code Fuquay-Varina NC 27526	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Paragon Application Systems, Inc.	Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jill Metzger	Date of Receipt MM / DD / YYYY 11 / 09 / 2008
	Mailing Address P.O. Box 8266	<b>Transaction ID:</b> SA11AI.27654
	City State Zip Code Bossier City LA 71113	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Bossier Parish School Board	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brandon Meyer	Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address 333 Baer Drive	<b>Transaction ID:</b> SA11AI.24068
	City State Zip Code Hudson WI 54016	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Carlson Marketing Worldwide	Occupation Senior Travel Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 427.08	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	475.00
<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 54 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Brandon Meyer

Mailing Address 333 Baer Drive

City Hudson State WI Zip Code 54016

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

Name of Employer Carlson Marketing Worldwide Occupation Senior Travel Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 604.68

Date of Receipt 10 / 30 / 2008

Transaction ID: SA11AI.25816

Amount of Each Receipt this Period 177.60

**B.**

Full Name (Last, First, Middle Initial)  
Edward Meyers

Mailing Address 1829 23rd Street NW

City Washington State DC Zip Code 20008

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 24 / 2008

Transaction ID: SA11AI.28680

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
John Miller

Mailing Address 1562 Merganser Ct

City Lino Lakes State MN Zip Code 55038

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

Name of Employer National Marrow Donor Program Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 01 / 2008

Transaction ID: SA11AI.26654

Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1777.60

**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 55 / 119
	(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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Catherine Mills		Date of Receipt
	Mailing Address 206 Loblolly Ln		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Choudrant	LA	71227
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Squire Creek Country Club		Occupation Staff	<b>Transaction ID:</b> SA11AI.28106
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Eileen Monroe		Date of Receipt
	Mailing Address 302 Front Street		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Luttrell	TN	37779
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation Retired	<b>Transaction ID:</b> SA11AI.28257
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="375.00"/>	<input type="text" value="50.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Marty Morehouse		Date of Receipt
	Mailing Address 201 Wilcrest #1708		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Houston	TX	77042
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer R.G. Miller Engineers		Occupation Engineer	<b>Transaction ID:</b> SA11AI.25796
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="425.00"/>	<input type="text" value="25.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1075.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 119

(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Marty Morehouse

Mailing Address 201 Wilcrest  
#1708

City State Zip Code  
Houston TX 77042

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

Name of Employer Occupation  
R.G. Miller Engineers Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
525.00

Date of Receipt

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

Transaction ID: SA11AI.26540

Amount of Each Receipt this Period

100.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
Deborah Mulholand

Mailing Address 120 Waterfront Place

City State Zip Code  
Dayton OH 45458

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

Name of Employer Occupation  
Angelic Enterprises Business Owner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
268.84

Date of Receipt

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

Transaction ID: SA11AI.27764

Amount of Each Receipt this Period

10.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
Patsy Murphy

Mailing Address 4 John Stark Ln

City State Zip Code  
Hampton NH 03842

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

Name of Employer Occupation  
Homemaker

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

Date of Receipt

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

Transaction ID: SA11AI.28502

Amount of Each Receipt this Period

500.00
--------

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

610.00
--------

**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 57 / 119  
(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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Loretta Neal

Mailing Address 1301 Avenue I

City Anson State TX Zip Code 79501

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.08

Date of Receipt 10 / 28 / 2008

Transaction ID: SA11AI.25471

Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Loretta Neal

Mailing Address 1301 Avenue I

City Anson State TX Zip Code 79501

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 258.08

Date of Receipt 10 / 30 / 2008

Transaction ID: SA11AI.26173

Amount of Each Receipt this Period 45.00

**C.** Full Name (Last, First, Middle Initial)  
James Neff

Mailing Address 23988 Zion Avenue

City Winsted State MN Zip Code 55395

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

Name of Employer Self-Employed Occupation Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2008

Transaction ID: SA11AI.25689

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00

**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 58 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Delana Newton

Mailing Address 17 County Road 8051

City State Zip Code  
Rienzi MS 38865

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

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

Transaction ID: SA11AI.27635

Amount of Each Receipt this Period

20.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
David Olson

Mailing Address P.O. Box 53832

City State Zip Code  
Fayetteville NC 28305

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

Name of Employer Occupation  
US Army Physician

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

Date of Receipt

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

Transaction ID: SA11AI.24779

Amount of Each Receipt this Period

300.00
--------

**C.**

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

Mailing Address 4107 Mudtown Rd

City State Zip Code  
Lavaca AR 72941

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

Name of Employer Occupation  
Retired

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

Date of Receipt

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

Transaction ID: SA11AI.28489

Amount of Each Receipt this Period

300.00
--------

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

620.00
--------

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

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edward Paul

Mailing Address 5928 Jake Sears Circle

City State Zip Code  
Virginia Beach VA 23464

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

Name of Employer Occupation  
Self-Employed Computer Repair

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.25949

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Basil Pinzone

Mailing Address 10142 Fairmount Road

City State Zip Code  
Newbury OH 44065

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

Name of Employer Occupation  
Pinzone Engineering Group, Inc. Engineer

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.26313

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Elton Pody

Mailing Address 514 Wimbledon Blvd

City State Zip Code  
Alexandria LA 71303

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

Name of Employer Occupation  
Central LA Chamber of Commerce President

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

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.27935

Amount of Each Receipt this Period

400.00

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

850.00

**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 60 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael Powell

Mailing Address 570 W. Freedom Ave

City State Zip Code  
Orange CA 92865

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

Name of Employer Occupation  
Water Heater Man, Inc. Business Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt

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

Transaction ID: SA11AI.24396

Amount of Each Receipt this Period

100.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
Linda Rayborn

Mailing Address 1480 Brookgreen Drive

City State Zip Code  
Myrtle Beach SC 29577

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 949.19

Date of Receipt

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

Transaction ID: SA11AI.24789

Amount of Each Receipt this Period

25.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
Linda Rayborn

Mailing Address 1480 Brookgreen Drive

City State Zip Code  
Myrtle Beach SC 29577

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 974.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	0	8

Transaction ID: SA11AI.27009

Amount of Each Receipt this Period

25.00
-------

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

150.00

**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 61 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Eric Redman

Mailing Address P.O. Box 930

City State Zip Code  
Rathdrum ID 83858

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

Name of Employer  
Redman & Company Insurance, Inc.

Occupation  
Insurance Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2008

**Transaction ID:** SA11AI.27722

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard Richardson, Sr.

Mailing Address P O Box 1889

City State Zip Code  
West Monroe LA 71294

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

Name of Employer  
D & J Construction Company

Occupation  
Asphalt Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2008

**Transaction ID:** SA11AI.28102

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Monte Rollette

Mailing Address P.O. Box 442

City State Zip Code  
Hot Springs SD 57747

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

Name of Employer  
Self-Employed

Occupation  
Forestry

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2008

**Transaction ID:** SA11AI.25918

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

**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 62 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Schneider  
 Mailing Address 5942 Millstone Ln  
 City State Zip Code  
 Stone Mountain GA 30087  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 1 0 / 2 0 0 8  
**Transaction ID:** SA11AI.28491  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Physician  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Richard See  
 Mailing Address P.O. Box 924298  
 City State Zip Code  
 Princeton FL 33092  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 8 / 2 0 0 8  
**Transaction ID:** SA11AI.25463  
 Amount of Each Receipt this Period  
 10.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Seedway, LLC Vegetable Seed Sales  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 560.00

**C.** Full Name (Last, First, Middle Initial)  
James Shipe  
 Mailing Address 39430 Rodeffer Rd  
 City State Zip Code  
 Lovettsville VA 20180  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 1 3 / 2 0 0 8  
**Transaction ID:** SA11AI.27688  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1060.00  
**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 63 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Eric R. Siegel

Mailing Address 501 Ridgeway Dr.  
Apt. 7

City State Zip Code  
Little Rock AR 72205

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

Name of Employer UAMS Occupation Statistician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.28225

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Amos Slater

Mailing Address 23180 Harper Avenue

City State Zip Code  
Port Charlotte FL 33980

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

Name of Employer Vehicle Clinic, Inc. Occupation Technician & Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

**Transaction ID:** SA11AI.24873

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Dayna Smith

Mailing Address 407 Court Avenue

City State Zip Code  
Weston WV 26452

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

Name of Employer Occupation Unemployed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 466.70

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

**Transaction ID:** SA11AI.24181

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2310.00

**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 64 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Dayna Smith  
Mailing Address 407 Court Avenue  
City Weston State WV Zip Code 26452  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Unemployed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 486.78  
Date of Receipt 10 / 25 / 2008  
Transaction ID: SA11AI.24776  
Amount of Each Receipt this Period 20.08

**B.** Full Name (Last, First, Middle Initial)  
Dayna Smith  
Mailing Address 407 Court Avenue  
City Weston State WV Zip Code 26452  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Unemployed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 506.86  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.25698  
Amount of Each Receipt this Period 20.08

**C.** Full Name (Last, First, Middle Initial)  
Dayna Smith  
Mailing Address 407 Court Avenue  
City Weston State WV Zip Code 26452  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Unemployed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 526.94  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.27000  
Amount of Each Receipt this Period 20.08

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 60.24  
**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 65 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Joan Smith

Mailing Address 575 E. Torrey St.  
Apt. 224

City State Zip Code  
New Braunfels TX 78130

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

Name of Employer Occupation  
Seguin Independent School District Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2008

**Transaction ID:** SA11AI.26536

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Joan Smith

Mailing Address 575 E. Torrey St.  
Apt. 224

City State Zip Code  
New Braunfels TX 78130

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

Name of Employer Occupation  
Seguin Independent School District Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.08

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2008

**Transaction ID:** SA11AI.27763

Amount of Each Receipt this Period  
20.08

**C.** Full Name (Last, First, Middle Initial)  
Linda Smith

Mailing Address 113 Island Avenue

City State Zip Code  
Buckhannon WV 26201

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

Name of Employer Occupation  
Riverside Bed & Breakfast Owner/Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** SA11AI.24751

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 220.08

**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 66 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Debbie Story

Mailing Address P.O. Box 787

City Magnolia State AR Zip Code 71754

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

Name of Employer Self-Employed Occupation Oil Well Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.28565

Amount of Each Receipt this Period 5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Tarpey

Mailing Address 6589 Oak Hill Manor

City Glen Carbon State IL Zip Code 62034

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

Name of Employer Department of Veteran Affairs Occupation CSR - Telephone

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2008

Transaction ID: SA11AI.25148

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul Tarpey

Mailing Address 6589 Oak Hill Manor

City Glen Carbon State IL Zip Code 62034

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

Name of Employer Department of Veteran Affairs Occupation CSR - Telephone

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 30 / 2008

Transaction ID: SA11AI.26171

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5200.00

**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 67 / 119  
(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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Paul Tarpey

Mailing Address 6589 Oak Hill Manor

City State Zip Code  
Glen Carbon IL 62034

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

Name of Employer Department of Veteran Affairs  
Occupation CSR - Telephone

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2008

**Transaction ID:** SA11AI.27392

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mark Taylor

Mailing Address P.O. Box 884

City State Zip Code  
Magnolia AR 71754

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

Name of Employer Southern Aluminum  
Occupation President/Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 03 / 2008

**Transaction ID:** SA11AI.27942

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
J.L. Terrill

Mailing Address 1908 Horseshoe Drive

City State Zip Code  
Alexandria LA 71301

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

Name of Employer  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** SA11AI.28587

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3050.00**

**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 68 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
J.L. Terrill

Mailing Address 1908 Horseshoe Drive

City State Zip Code  
Alexandria LA 71301

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

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

Transaction ID: SA11AI.28097

Amount of Each Receipt this Period

1000.00
---------

**B.**

Full Name (Last, First, Middle Initial)  
Donna Teubert

Mailing Address 5211 Hutchison Drive

City State Zip Code  
South Beloit IL 61080

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Transaction ID: SA11AI.25048

Amount of Each Receipt this Period

10.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
Donna Teubert

Mailing Address 5211 Hutchison Drive

City State Zip Code  
South Beloit IL 61080

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: SA11AI.26368

Amount of Each Receipt this Period

10.00
-------

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

1020.00
---------

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

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

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

FOR LINE NUMBER: PAGE 69 / 119  
(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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Sally Thackery  
Mailing Address 20858 Highway 62 West  
City State Zip Code  
Eureka Springs AR 72631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Taglines Occupation Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.25903  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
R. P. Thomas  
Mailing Address 763 Main St  
City State Zip Code  
Gibbsland LA 71028  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.28099  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
R. P. Thomas  
Mailing Address 763 Main St  
City State Zip Code  
Gibbsland LA 71028  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.28100  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2100.00  
**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 70 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Douglas Trippe

Mailing Address 38 Knotty Pine Pl

City State Zip Code  
Texarkana TX 75503

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

Name of Employer Occupation  
Texarkana Radiology Associates Healthcare Worker

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

Date of Receipt  

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

**Transaction ID:** SA11AI.28497

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Danille Turissini

Mailing Address 40 Puget Loop

City State Zip Code  
Port Ludlow WA 98365

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

Name of Employer Occupation  
The Word Courier Public & Media Relations Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.43

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

**Transaction ID:** SA11AI.25311

Amount of Each Receipt this Period  
20.08

**C.**

Full Name (Last, First, Middle Initial)  
Amy Walker

Mailing Address 8690 E. Highlands Circle

City State Zip Code  
Palmer AK 99645

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

Name of Employer Occupation  
Bows By Lisa Luann Sales

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.08

Date of Receipt  

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

**Transaction ID:** SA11AI.24807

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1070.08**

**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 71 / 119  
(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)  
HUCK PAC

**A.**

Full Name (Last, First, Middle Initial)  
Chi-Yen Wang

Mailing Address 3517 254th Avenue SE

City Issaquah State WA Zip Code 98029

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

Name of Employer EMC Occupation Backup Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 22 / 2008

Transaction ID: SA11AI.28663

Amount of Each Receipt this Period 60.00

**B.**

Full Name (Last, First, Middle Initial)  
Paige Ward

Mailing Address 357 Blackburn Road

City Quarryville State PA Zip Code 17566

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

Name of Employer Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2008

Transaction ID: SA11AI.27089

Amount of Each Receipt this Period 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Chad Wehba

Mailing Address 11301 W Olympic Bl #546

City Los Angeles State CA Zip Code 90064

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

Name of Employer BentleyForbes Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 03 / 2008

Transaction ID: SA11AI.26731

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1260.00

**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 72 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Allyson Weinberg  
Mailing Address 2510 Alhambra Court  
City Santa Rosa Valley State VA Zip Code 93012  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.25523  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Marcia Weslocky  
Mailing Address 3209 Hillside Court  
City Plano State TX Zip Code 75093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.25374  
Amount of Each Receipt this Period 10.00

**C.** Full Name (Last, First, Middle Initial)  
Ramah Whiteside  
Mailing Address 2136 Rohrbuch Road  
City Pipe Creek State TX Zip Code 78063  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.24251  
Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2520.00  
**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 73 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Thomas S. Williams

Mailing Address 867 Main Street

City State Zip Code  
Gibsland LA 71028

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

**Transaction ID:** SA11AI.24753

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Maxine Wilson

Mailing Address 251 Hardwood Court

City State Zip Code  
Adairsville GA 30103

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.35

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

**Transaction ID:** SA11AI.24758

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Maxine Wilson

Mailing Address 251 Hardwood Court

City State Zip Code  
Adairsville GA 30103

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.35

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.25953

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2020.00

**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 74 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Maxine Wilson  
 Mailing Address 251 Hardwood Court  
 City Adairsville State GA Zip Code 30103  
 Date of Receipt MM / DD / YYYY: 10 / 30 / 2008  
**Transaction ID:** SA11AI.26065  
 Amount of Each Receipt this Period: 10.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼: 260.35

**B.** Full Name (Last, First, Middle Initial)  
Maxine Wilson  
 Mailing Address 251 Hardwood Court  
 City Adairsville State GA Zip Code 30103  
 Date of Receipt MM / DD / YYYY: 11 / 08 / 2008  
**Transaction ID:** SA11AI.27215  
 Amount of Each Receipt this Period: 25.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼: 285.35

**C.** Full Name (Last, First, Middle Initial)  
Maxine Wilson  
 Mailing Address 251 Hardwood Court  
 City Adairsville State GA Zip Code 30103  
 Date of Receipt MM / DD / YYYY: 11 / 09 / 2008  
**Transaction ID:** SA11AI.27235  
 Amount of Each Receipt this Period: 10.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼: 295.35

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00  
**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 75 / 119  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Maxine Wilson

Mailing Address 251 Hardwood Court

City Adairsville State GA Zip Code 30103

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

Name of Employer Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.43

Date of Receipt 11 / 22 / 2008

Transaction ID: SA11AI.28655

Amount of Each Receipt this Period 20.08

**B.** Full Name (Last, First, Middle Initial)  
John Wisenbaker, Jr.

Mailing Address 6003 Graystone Bluffs Court

City Kingwood State TX Zip Code 77345

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

Name of Employer Wisenbaker Builder Services Occupation Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2008

Transaction ID: SA11AI.27625

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Janet A. Zeager

Mailing Address 4010 E. Harrisburg Pike

City Middletown State PA Zip Code 17057

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

Name of Employer Requested Occupation Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.28576

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1020.08

**TOTAL** This Period (last page this line number only) ..... ► 66362.47

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

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

FOR LINE NUMBER: PAGE 76 / 119  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
JOHN MCCAIN 2008 INC.  
Mailing Address PO BOX 16118

City State Zip Code  
ARLINGTON VA 22215

FEC ID number of contributing federal political committee. **C** C00430470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
796.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 7 / 2 0 0 8  
**Transaction ID:** SA15.27576  
 Amount of Each Receipt this Period  
 796.00  
 Travel Reimbursement

**B.** Full Name (Last, First, Middle Initial)  
KLF & Company  
Mailing Address 12100 Rainwood Road #8

City State Zip Code  
Little Rock AR 72212

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
379.15

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 8  
**Transaction ID:** SA15.27616  
 Amount of Each Receipt this Period  
 379.15  
 Refund on Event Venue Rental

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1175.15**

**TOTAL** This Period (last page this line number only) ..... ► **1175.15**

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) America Direct, Inc.</p> <p>Mailing Address 1272 Corporate Park Drive Second Floor</p> <p>City Forest State VA Zip Code 24551</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27436</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8641.98"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Apptix DBA MailStreet</p> <p>Mailing Address Dept. CH19172</p> <p>City Palatine State IL Zip Code 60055</p> <p>Purpose of Disbursement Blackberry Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27432</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="211.30"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Apptix DBA MailStreet</p> <p>Mailing Address Dept. CH19172</p> <p>City Palatine State IL Zip Code 60055</p> <p>Purpose of Disbursement Blackberry Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27601</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="201.35"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9054.63"/>
<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address P.O. Box 650661</p> <p>City Dallas State TX Zip Code 75265</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27543</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="732.41"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address P.O. Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27541</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="841.03"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bonnie Blue Public Relations</p> <p>Mailing Address P.O. Box 725587</p> <p>City Atlanta State GA Zip Code 31139</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27489</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25184.70"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="26758.14"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chris Caldwell</p> <p>Mailing Address 3661 S. Tower Circle</p> <p>City Fayetteville State AR Zip Code 72704</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27573</p> <p>Date of Disbursement  <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>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>427.94</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	8	427.94
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	6	/	2	0	0	8													
427.94																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Judith A. Crouch</p> <p>Mailing Address 59 Belmont Drive</p> <p>City Little Rock State AR Zip Code 72204</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27479</p> <p>Date of Disbursement  <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>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>2000.00</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	8	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	3	1	/	2	0	0	8													
2000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Judith A. Crouch</p> <p>Mailing Address 59 Belmont Drive</p> <p>City Little Rock State AR Zip Code 72204</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27551</p> <p>Date of Disbursement  <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>1</td><td>1</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>2000.00</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	4	/	2	0	0	8	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	4	/	2	0	0	8													
2000.00																						

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<table border="1"> <tr> <td>4427.94</td> </tr> </table>	4427.94
4427.94		
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wendy Dooley</p> <p>Mailing Address 19 Deerwood Drive</p> <p>City Conway State AR Zip Code 72034</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27480</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1450.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Wendy Dooley</p> <p>Mailing Address 19 Deerwood Drive</p> <p>City Conway State AR Zip Code 72034</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27552</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1450.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westshore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27434</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3753.63"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="6653.63"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
HUCK PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westshore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27540</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3270.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westshore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27605</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6266.82"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC</p> <p>Mailing Address 98 Alexandria Pike Suite 53</p> <p>City Warrenton State VA Zip Code 20186</p> <p>Purpose of Disbursement Consulting - Legal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27470</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3300.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="12836.82"/>
<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 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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC	Transaction ID: SB21B.27602
	Mailing Address 98 Alexandria Pike Suite 53	Date of Disbursement MM / DD / YYYY 11 / 20 / 2008
	City Warrenton State VA Zip Code 20186	Amount of Each Disbursement this Period 4409.50
	Purpose of Disbursement Consulting - Legal	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mike Huckabee	Transaction ID: SB21B.27566
	Mailing Address 1134 Silverwood Trail	Date of Disbursement MM / DD / YYYY 11 / 14 / 2008
	City North Little Rock State AR Zip Code 72116	Amount of Each Disbursement this Period 395.12
	Purpose of Disbursement Travel Reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mike Huckabee	Transaction ID: SB21B.27600
	Mailing Address 1134 Silverwood Trail	Date of Disbursement MM / DD / YYYY 11 / 20 / 2008
	City North Little Rock State AR Zip Code 72116	Amount of Each Disbursement this Period 242.60
	Purpose of Disbursement Travel Reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	5047.22
<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 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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Sarah Huckabee	Transaction ID: SB21B.27481 Date of Disbursement 10 / 31 / 2008
	Mailing Address 703 Cedar Ridge Drive	Amount of Each Disbursement this Period 2250.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sarah Huckabee	Transaction ID: SB21B.27553 Date of Disbursement 11 / 14 / 2008
	Mailing Address 703 Cedar Ridge Drive	Amount of Each Disbursement this Period 2250.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Thomas Drake Jarman	Transaction ID: SB21B.27435 Date of Disbursement 10 / 16 / 2008
	Mailing Address 5405 Stanford Drive	Amount of Each Disbursement this Period 1607.36
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Travel Reimbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6107.36
<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 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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Thomas Drake Jarman	Transaction ID: SB21B.27482 Date of Disbursement 10 / 31 / 2008
	Mailing Address 5405 Stanford Drive	Amount of Each Disbursement this Period 1800.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Thomas Drake Jarman	Transaction ID: SB21B.27554 Date of Disbursement 11 / 14 / 2008
	Mailing Address 5405 Stanford Drive	Amount of Each Disbursement this Period 1800.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Thomas Drake Jarman	Transaction ID: SB21B.27561 Date of Disbursement 11 / 14 / 2008
	Mailing Address 5405 Stanford Drive	Amount of Each Disbursement this Period 1710.90
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Travel Reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5310.90
<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 800 Wyndhurst Drive Apt. 22</p> <p>City Lynchburg State VA Zip Code 24502</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27483</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1700.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 800 Wyndhurst Drive Apt. 22</p> <p>City Lynchburg State VA Zip Code 24502</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27555</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1700.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JPMS Cox</p> <p>Mailing Address 11300 Cantrell Road Suite 301</p> <p>City Little Rock State AR Zip Code 72212</p> <p>Purpose of Disbursement Accounting &amp; Compliance Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27582</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17343.14"/></p>

**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 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)  
HUCK PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) JPMS Cox</p> <p>Mailing Address 11300 Cantrell Road Suite 301</p> <p>City Little Rock State AR Zip Code 72212</p> <p>Purpose of Disbursement Accounting &amp; Compliance Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27606</p> <p>Date of Disbursement 11 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 2857.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) LCM Strategies</p> <p>Mailing Address 3409 Hopkins Street</p> <p>City Nashville State TN Zip Code 37215</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27571</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) LCM Strategies</p> <p>Mailing Address 3409 Hopkins Street</p> <p>City Nashville State TN Zip Code 37215</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27581</p> <p>Date of Disbursement 11 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 6005.82</p>

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

13863.32

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Optus, Inc. <hr/> Mailing Address P.O. Box 2503 <hr/> City Jonesboro State AR Zip Code 72402 <hr/> Purpose of Disbursement Telephone Equipment Lease Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27603 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 519.50
	Category/Type
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Paychex, Inc. <hr/> Mailing Address 12921 Cantrell Road Suite 100 <hr/> City Little Rock State AR Zip Code 72223 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27484 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 702.28
	Category/Type
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Paychex, Inc. <hr/> Mailing Address 12921 Cantrell Road Suite 100 <hr/> City Little Rock State AR Zip Code 72223 <hr/> Purpose of Disbursement Payroll Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27549 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 178.02
	Category/Type
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1399.80
<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27556</p> <p>Date of Disbursement 11 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 702.28</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27422</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 15.19</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27437</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 16.02</p> <p>Category/Type</p>

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

733.49

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27438 Date of Disbursement 10 / 18 / 2008
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 21.51

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27439 Date of Disbursement 10 / 19 / 2008
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5.73

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27440 Date of Disbursement 10 / 20 / 2008
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 91.23

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>118.47</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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27441</p> <p>Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 129.28</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27442</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 78.48</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27443</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 67.51</p> <p>Category/Type</p>

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

275.27

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc. <hr/> Mailing Address 4100 Solutions Center #774100 <hr/> City Chicago State IL Zip Code 60677 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27472 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 69.39 Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc. <hr/> Mailing Address 4100 Solutions Center #774100 <hr/> City Chicago State IL Zip Code 60677 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27473 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 33.11 Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc. <hr/> Mailing Address 4100 Solutions Center #774100 <hr/> City Chicago State IL Zip Code 60677 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27474 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 31.63 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	134.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27475 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="280.86"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27476 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="115.01"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27477 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="203.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="599.65"/>
<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27478 <b>Date of Disbursement</b> 10 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 346.09</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27485 <b>Date of Disbursement</b> 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 259.33</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27486 <b>Date of Disbursement</b> 11 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 139.95</p>

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

745.37

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27487</p> <p>Date of Disbursement  <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>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>26.64</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	8	26.64
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	8													
26.64																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27488</p> <p>Date of Disbursement  <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>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>212.48</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	0	8	212.48
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	8													
212.48																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27492</p> <p>Date of Disbursement  <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>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>39.67</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	8	39.67
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	4	/	2	0	0	8													
39.67																						

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

**278.79**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27493 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="18.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27494 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="12.21"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27544 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="21.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="51.63"/>
<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27545</p> <p>Date of Disbursement 11 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 8.55</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27546</p> <p>Date of Disbursement 11 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 9.14</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27547</p> <p>Date of Disbursement 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 2.37</p>

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

20.06

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



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27550 Date of Disbursement 11 / 11 / 2008
	Mailing Address 4100 Solutions Center #774100	Amount of Each Disbursement this Period 2.50
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27557 Date of Disbursement 11 / 12 / 2008
	Mailing Address 4100 Solutions Center #774100	Amount of Each Disbursement this Period 25.13
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27558 Date of Disbursement 11 / 13 / 2008
	Mailing Address 4100 Solutions Center #774100	Amount of Each Disbursement this Period 66.77
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	94.40
<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 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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27559 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="16.58"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27567 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="7.57"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27568 Date of Disbursement
	Mailing Address 4100 Solutions Center #774100	<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="8.48"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="32.63"/>
<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 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27596</p> <p>Date of Disbursement 11 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 5.59</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27597</p> <p>Date of Disbursement 11 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 6.03</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal, Inc.</p> <p>Mailing Address 4100 Solutions Center #774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27598</p> <p>Date of Disbursement 11 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 5.18</p>

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

16.80

**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 100 / 119

<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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27599
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement MM / DD / YYYY 11 / 20 / 2008
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 5.74
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27617
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement MM / DD / YYYY 11 / 21 / 2008
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 12.99
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27618
	Mailing Address 4100 Solutions Center #774100	Date of Disbursement MM / DD / YYYY 11 / 22 / 2008
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period 22.85
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **41.58**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27619 Date of Disbursement 11 / 23 / 2008
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 10.02 Category/Type

B.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.27620 Date of Disbursement 11 / 24 / 2008
	Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 10.62 Category/Type

C.	Full Name (Last, First, Middle Initial) Preferred Communications	Transaction ID: SB21B.27569 Date of Disbursement 10 / 16 / 2008
	Mailing Address 6090 Franconia Road Suite D City Alexandria State VA Zip Code 22310 Purpose of Disbursement Direct Mail List Purchase Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 15000.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15020.64
<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 102 / 119

<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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Preferred Communications	Transaction ID: SB21B.27570 Date of Disbursement
	Mailing Address 6090 Franconia Road Suite D	<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22310	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Mail List Purchase	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Premiere Marketing	Transaction ID: SB21B.27607 Date of Disbursement
	Mailing Address 1000 Corporate Centre Drive Suite 120	<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Franklin State TN Zip Code 37067	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Materials	<input type="text" value="7800.00"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) QualChoice	Transaction ID: SB21B.27469 Date of Disbursement
	Mailing Address 10825 Financial Centre Parkway	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Benefits - Health Insurance	<input type="text" value="1366.51"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="24166.51"/>
<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)

PAGE 103 / 119

<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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Safe Foods</p> <p>Mailing Address 4801 North Shore Drive</p> <p>City North Little Rock State AR Zip Code 72118</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27542</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Take '08</p> <p>Mailing Address P.O. Box 1253</p> <p>City Oakland State FL Zip Code 34760</p> <p>Purpose of Disbursement Event Venue Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27572</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Twin City Printing</p> <p>Mailing Address P.O. Box 15368</p> <p>City North Little Rock State AR Zip Code 72231</p> <p>Purpose of Disbursement Printing Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27433</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="401.26"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4651.26"/>
<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)

PAGE 104 / 119

<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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Twin City Printing	Transaction ID: SB21B.27604 Date of Disbursement
	Mailing Address P.O. Box 15368	<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City North Little Rock State AR Zip Code 72231	Amount of Each Disbursement this Period
	Purpose of Disbursement Event Invitations	<input type="text" value="386.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.27425 Date of Disbursement
	Mailing Address P.O. Box 8999	<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment - See Memos	<input type="text" value="532.47"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB21B.27425.0 Date of Disbursement
	Mailing Address P.O. Box 6463	<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Service	<input type="text" value="381.63"/>
	Candidate Name	Category/Type
	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) ▼

[MEMO ITEM]

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 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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: SB21B.27425.3 Date of Disbursement																			
	Mailing Address 2600 Cantrell Road	<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>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office Expense	<table border="1"><tr><td>84.95</td></tr></table>	84.95																		
84.95																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.27444 Date of Disbursement																			
	Mailing Address P.O. Box 8999	<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>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	8												
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment - See Memos	<table border="1"><tr><td>1971.05</td></tr></table>	1971.05																		
1971.05																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Delta Airlines	Transaction ID: SB21B.27444.0 Date of Disbursement																			
	Mailing Address P.O. Box 20706	<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>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	8												
	City Atlanta State GA Zip Code 30320	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel	<table border="1"><tr><td>1365.51</td></tr></table>	1365.51																		
1365.51																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1971.05</td></tr></table>	1971.05
1971.05		
<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)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.27444.1 Date of Disbursement
	Mailing Address P.O. Box 36647 - 1CR	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="183.00"/>
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.27459 Date of Disbursement
	Mailing Address P.O. Box 8999	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment - See Memos	<input type="text" value="2756.17"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.27459.0 Date of Disbursement
	Mailing Address P.O. Box 619612 MD 2400	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City DFW Airport State TX Zip Code 75261	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="1096.00"/>
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="2756.17"/>
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 107 / 119

<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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address P.O. Box 20706</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27459.1</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 859.50</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Amphitheatre Parkway</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Advertising Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27459.2</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 463.21</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 1200 E. Algonquin Road</p> <p>City Elk Grove Township State IL Zip Code 60007</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27459.4</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 98.50</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

**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 108 / 119

<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)  
HUCK PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Dish Network Mailing Address Department 0063 City Palatine State IL Zip Code 60055 Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.27459.6 Date of Disbursement 10 / 23 / 2008
	Amount of Each Disbursement this Period 91.42 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Visa Mailing Address P.O. Box 8999 City San Francisco State CA Zip Code 94128 Purpose of Disbursement Credit Card Payment - See Memos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.27497 Date of Disbursement 11 / 06 / 2008
	Amount of Each Disbursement this Period 4656.53

<b>C.</b> Full Name (Last, First, Middle Initial) US Post Office Mailing Address 600 E. Capitol Avenue City Little Rock State AR Zip Code 72202 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.27497.1 Date of Disbursement 11 / 06 / 2008
	Amount of Each Disbursement this Period 1428.00 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4656.53
<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 109 / 119

<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)  
HUCK PAC

**A.** Full Name (Last, First, Middle Initial)  
Rosen Centre Hotel

Mailing Address 9840 International Drive

City Orlando State FL Zip Code 32819

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27497.2  
**Date of Disbursement:** 11 / 06 / 2008

Amount of Each Disbursement this Period: 982.31

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Courtyard by Marriott

Mailing Address 9190 Gulf Freeway

City Houston State TX Zip Code 77017

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27497.3  
**Date of Disbursement:** 11 / 06 / 2008

Amount of Each Disbursement this Period: 231.66

**[MEMO ITEM]**

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

Mailing Address 100 Gaspee Street

City Providence State RI Zip Code 02903

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27497.4  
**Date of Disbursement:** 11 / 06 / 2008

Amount of Each Disbursement this Period: 266.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 2600 Cantrell Road</p> <p>City Little Rock State AR Zip Code 72202</p> <p>Purpose of Disbursement Office Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27497.5</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="86.46"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hotels.com</p> <p>Mailing Address 10440 N Central Expy #400</p> <p>City Dallas State TX Zip Code 75231</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27497.6</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="577.16"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Northwest Airlines, Inc.</p> <p>Mailing Address 2700 Lone Oak Pkwy</p> <p>City Eagan State MN Zip Code 55121</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27497.7</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="291.00"/></p> <p><b>[MEMO ITEM]</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 111 / 119

<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)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Orbitz Worldwide, Inc.	Transaction ID: SB21B.27497.10
	Mailing Address 500 W. Madison	Date of Disbursement MM / DD / YYYY 11 / 06 / 2008
	City Chicago State IL Zip Code 60661	Amount of Each Disbursement this Period 288.86
	Purpose of Disbursement Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Courtyard by Marriott	Transaction ID: SB21B.27497.11
	Mailing Address 1520 NW 114th Street	Date of Disbursement MM / DD / YYYY 11 / 06 / 2008
	City Clive State IA Zip Code 50325	Amount of Each Disbursement this Period 239.96
	Purpose of Disbursement Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21B.27528
	Mailing Address P.O. Box 8999	Date of Disbursement MM / DD / YYYY 11 / 06 / 2008
	City San Francisco State CA Zip Code 94128	Amount of Each Disbursement this Period 855.15
	Purpose of Disbursement Credit Card Payment - See Memos	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	855.15
<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)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Staples Direct	Transaction ID: SB21B.27528.0 Date of Disbursement 11 / 06 / 2008
	Mailing Address 500 Staples Drive	Amount of Each Disbursement this Period 82.81
	City Farmington State MA Zip Code 01702	
	Purpose of Disbursement Office Expense	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Xerox	Transaction ID: SB21B.27528.1 Date of Disbursement 11 / 06 / 2008
	Mailing Address P.O. Box 4505 45 Glover Avenue	Amount of Each Disbursement this Period 215.18
	City Norwalk State CT Zip Code 06856	
	Purpose of Disbursement Office Expense	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B.27528.2 Date of Disbursement 11 / 06 / 2008
	Mailing Address P.O. Box 619612 MD 2400	Amount of Each Disbursement this Period 280.00
	City DFW Airport State TX Zip Code 75261	
	Purpose of Disbursement Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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)

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Hotels.com</p> <p>Mailing Address 10440 N Central Expy #400</p> <p>City Dallas State TX Zip Code 75231</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27528.3 <b>Date of Disbursement</b> 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 266.39</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address P.O. Box 8999</p> <p>City San Francisco State CA Zip Code 94128</p> <p>Purpose of Disbursement Credit Card Payment - See Memos</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27535 <b>Date of Disbursement</b> 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 227.35</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Alamo Rent-A-Car</p> <p>Mailing Address 17330 Palmetto Pines</p> <p>City Houston State TX Zip Code 77032</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27535.0 <b>Date of Disbursement</b> 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 227.35</p> <p><b>[MEMO ITEM]</b></p>

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

227.35

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

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

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

FOR LINE NUMBER: (check only one)

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<input 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)  
HUCK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address P.O. Box 8999</p> <p>City San Francisco State CA Zip Code 94128</p> <p>Purpose of Disbursement Credit Card Payment - See Memos</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27563 <b>Date of Disbursement</b> 11 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 150.76</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address P.O. Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27563.0 <b>Date of Disbursement</b> 11 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 150.76</p> <p>[MEMO ITEM]</p>

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

150.76

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

170719.18

**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 115 / 119

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.	Full Name (Last, First, Middle Initial) James E. Davison	Transaction ID: SB28A.28871
	Mailing Address P.O. Box 607	Date of Disbursement 11 / 17 / 2008
	City Ruston State LA Zip Code 71273	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Refund of Excess Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

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

**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 116 / 119

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

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NAME OF COMMITTEE (In Full)  
HUCK PAC

A.

Full Name (Last, First, Middle Initial)  
Citizens to Elect Ed Setzler

Mailing Address 1555 Boxwood Trace

City Acworth State GA Zip Code 30102

Purpose of Disbursement  
Campaign Contribution

Candidate Name  
Ed Setzler

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.27577

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

1000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 117 / 119	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
HUCK PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JOHN MCCAIN 2008 INC.			Nature of Debt (Purpose): Travel - Primary Election Expense
Mailing Address PO BOX 16118			
City ARLINGTON	State VA	ZIP Code 22215	

Outstanding Balance Beginning This Period		Transaction ID: SD9.21631	
796.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	796.00	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
HUCK PAC

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> LCM Strategies			Nature of Debt (Purpose): Direct Mail
Mailing Address 3409 Hopkins Street			
City Nashville	State TN	ZIP Code 37215	

Outstanding Balance Beginning This Period 5000.00		<b>Transaction ID:</b> SD10.21632	
Amount Incurred This Period 6005.82	Payment This Period 11005.82	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Preferred Communications			Nature of Debt (Purpose): Direct Mail List Purchase
Mailing Address 6090 Franconia Road Suite D			
City Alexandria	State VA	ZIP Code 22310	

Outstanding Balance Beginning This Period 15000.00		<b>Transaction ID:</b> SD10.14799	
Amount Incurred This Period 45000.00	Payment This Period 30000.00	Outstanding Balance at Close of This Period 30000.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Take '08			Nature of Debt (Purpose): Event Venue Rental
Mailing Address P.O. Box 1253			
City Oakland	State FL	ZIP Code 34760	

Outstanding Balance Beginning This Period 3500.00		<b>Transaction ID:</b> SD10.21633	
Amount Incurred This Period 0.00	Payment This Period 3500.00	Outstanding Balance at Close of This Period 0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	30000.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	30000.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	30000.00

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) HUCK PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00448373
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee Optus, Inc.		Date M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 8
Mailing Address P.O. Box 2503		Amount 5000.00
City State Zip Code Jonesboro AR 72402		Transaction ID: SE.27594
Purpose of Expenditure Phone Solicitation		Office Sought: <input type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: C SAXBY CHAMBLISS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : <u>Runoff</u> 2008
		5000.00

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	5000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	5000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Bryan Jeffrey Signature	Date M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 9