

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

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

ADDRESS (number and street) 606 NORTH WASHINGTON STREET

Check if different than previously reported. (ACC) ALEXANDRIA VA 22314-1914

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00091561

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 type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 07 01 2008 through 09 30 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 Mr. RICHARD C OSTERGREN

Signature of Treasurer Electronically Filed by Mr. RICHARD C OSTERGREN Date 10 14 2008

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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		271319.72
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	713894.12									
(c) Total Receipts (from Line 19)	25285.29	796303.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	739179.41	1067623.47								
7. Total Disbursements (from Line 31)	131051.67	459495.73								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	608127.74	608127.74								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1116.00	16296.00
(i) Itemized (use Schedule A)	22478.33	774587.68
(ii) Unitemized	23594.33	790883.68
(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)	23594.33	790883.68
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1690.96	5420.07
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))	25285.29	796303.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25285.29	796303.75

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4051.67	190495.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4051.67	190495.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	127000.00	269000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	131051.67	459495.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131051.67	459495.73

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	23594.33	790883.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23594.33	790883.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4051.67	190495.73
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4051.67	190495.73

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
Ms KARIN E BENTLEY

Mailing Address **828 PINE MT LAKE RD NW**

City **BACKUS** State **MN** Zip Code **56435**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **09 / 30 / 2008**
Transaction ID: SA11AI.9364
 Amount of Each Receipt this Period **200.00**
CONTRIBUTIONS

B. Full Name (Last, First, Middle Initial)
Mr. JOHN W ELDRIDGE, Jr.

Mailing Address **9316 KENSINGTON LN**

City **WINDSOR** State **CA** Zip Code **95492**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 30 / 2008**
Transaction ID: SA11AI.9361
 Amount of Each Receipt this Period **500.00**
CONTRIBUTIONS

C. Full Name (Last, First, Middle Initial)
Mr. WILLIAM A REAMS

Mailing Address **2282 E MONTROSE CANYON DR.**

City **ORO VALLEY** State **AZ** Zip Code **85755-4725**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.00**

Date of Receipt **09 / 30 / 2008**
Transaction ID: SA11AI.9362
 Amount of Each Receipt this Period **216.00**
CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional) ► **916.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 39

(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A.

Full Name (Last, First, Middle Initial)
Mr. ROBERT M SHAW

Mailing Address 2857 ORCHARD AVENUE

City State Zip Code
MONTOURSVILLE PA 17754-9527

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: SA11AI.9363

Amount of Each Receipt this Period
200.00

CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	1116.00

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 8 / 39
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A.	Full Name (Last, First, Middle Initial) BANK OF AMERICA		Date of Receipt
	Mailing Address 3 DUPONT CIRCLE NW		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	WASHINGTON	DC	20036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA17.9181
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="556.91"/>
		<input type="text" value="4286.02"/>	INTEREST INCOME

B.	Full Name (Last, First, Middle Initial) BANK OF AMERICA		Date of Receipt
	Mailing Address 3 DUPONT CIRCLE NW		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	WASHINGTON	DC	20036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA17.9189
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="562.61"/>
		<input type="text" value="4848.63"/>	INTEREST INCOME

C.	Full Name (Last, First, Middle Initial) BANK OF AMERICA		Date of Receipt
	Mailing Address 3 DUPONT CIRCLE NW		<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	WASHINGTON	DC	20036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA17.9372
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="571.44"/>
		<input type="text" value="5420.07"/>	INTEREST INCOME

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1690.96"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1690.96"/>

**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)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) ENVELOPES UNLIMITED	Transaction ID: SB21B.9218 Date of Disbursement 07 / 10 / 2008
	Mailing Address 649 NORTH HORNERS LANE	Amount of Each Disbursement this Period 938.43
	City ROCKVILLE State MD Zip Code 20850-1299	
	Purpose of Disbursement PAC SOLICITATION- PRINTING, MAILING, DAT Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE CENTER	Transaction ID: SB21B.9343 Date of Disbursement 09 / 10 / 2008
	Mailing Address PHILADELPHIA	Amount of Each Disbursement this Period 1000.00
	City PHILADELPHIA State PA Zip Code 19255	
	Purpose of Disbursement 3RD QTR. EST. INCOME TAX-FORM 1120 Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VIRGINIA DEPARTMENT OF TAXATION	Transaction ID: SB21B.9342 Date of Disbursement 09 / 10 / 2008
	Mailing Address POST OFFICE BOX1500	Amount of Each Disbursement this Period 400.00
	City RICHMOND State VA Zip Code 23218-1500	
	Purpose of Disbursement 3RD QTR. EST. INCOME TAX Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2338.43
TOTAL This Period (last page this line number only)	4051.67

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
ANNA ESHOO FOR CONGRESS

Mailing Address C/O PFEIFER ASSOCIATES
2350 TAYLOR STREET STE 7

City SAN FRANCISCO State CA Zip Code 94133

Purpose of Disbursement

CONTRIBUTION

011
Category/
Type

Candidate Name
ANNA ESHOO

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 14

Transaction ID: SB23.9233

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address PO Box 5016

City Vancouver State WA Zip Code 98668

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
Rep. BRIAN N BAIRD

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WA District: 03

Transaction ID: SB23.9319

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 201 N 10TH STREET
SUITE 102

City COLUMBIA State MO Zip Code 65201

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
JUDITH W BAKER

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MO District: 09

Transaction ID: SB23.9271

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A.	Full Name (Last, First, Middle Initial) BARNEY FRANK FOR CONGRESS COMM	Transaction ID: SB23.9265 Date of Disbursement
	Mailing Address PO BOX 260	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City NEWTONVILLE State MA Zip Code 02460	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name BARNEY FRANK	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BARNEY FRANK FOR CONGRESS COMMITTEE	Transaction ID: SB23.9161 Date of Disbursement
	Mailing Address 38 IVY ST SE	<input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="2000.00"/>
	Candidate Name BARNEY FRANK	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	Transaction ID: SB23.9238 Date of Disbursement
	Mailing Address P.O.BOX 116	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City HYATTSVILLE State MD Zip Code 20781	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="2000.00"/>
	Candidate Name Rep. XAVIER BECERRA	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) BERMAN FOR CONGRESS	Transaction ID: SB23.9237 Date of Disbursement 09 / 29 / 2008	
	Mailing Address C/O JEFF LARIVEE 200 EAST JEFFERSON STREET		
	City FALLS CHURCH State VA Zip Code 22046	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement CONTRIBUTION Candidate Name Rep. HOWARD L BERMAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 28 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	
B.	Full Name (Last, First, Middle Initial) BOB FILNER FOR CONGRESS	Transaction ID: SB23.9360 Date of Disbursement 09 / 29 / 2008	
	Mailing Address PO BOX 121480		
	City CHULA VISTA State CA Zip Code 91912	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement CONTRIBUTION Candidate Name BOB FILNER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	
C.	Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS	Transaction ID: SB23.9296 Date of Disbursement 09 / 29 / 2008	
	Mailing Address PO BOX 1924		
	City MUSKOGEE State OK Zip Code 74402	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement CONTRIBUTION Candidate Name DAN BOREN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A.	Full Name (Last, First, Middle Initial) BOYDA FOR CONGRESS	Transaction ID: SB23.9160 Date of Disbursement 07 / 30 / 2008
	Mailing Address P. O. BOX 1474	
	City TOPEKA State KS Zip Code 66601	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION Candidate Name Rep. NANCY E BOYDA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS	Transaction ID: SB23.9250 Date of Disbursement 09 / 29 / 2008
	Mailing Address PO BOX 15703	
	City TALLAHASSEE State FL Zip Code 32317	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION Candidate Name Rep. F. ALLEN BOYD, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CAND MARY JO KILROY	Transaction ID: SB23.9174 Date of Disbursement 07 / 30 / 2008
	Mailing Address 271 E STATE ST	
	City COLUMBUS State OH Zip Code 43215	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION Candidate Name MARY JO KILROY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial) CAPUANO FOR CONGRESS <hr/> Mailing Address PO BOX 440305 <hr/> City SOMERVILLE State MA Zip Code 02144 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name MIKE CAPUANO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9266 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS <hr/> Mailing Address PO BOX 156 <hr/> City NEW ROADS State LA Zip Code 70760 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name DONALD J CAZAYOUX Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9326 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS <hr/> Mailing Address PO BOX 636 <hr/> City ANNANDALE State VA Zip Code 22003 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name TRAVIS W CHILDERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9168 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER SHAYS FOR CONGRESS

Mailing Address 98 East Avenue

City Norwalk State CT Zip Code 06851

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
Rep. CHRISTOPHER SHAYS

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

State: CT District: 04

Transaction ID: SB23.9249
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
CIRO D RODRIGUEZ FOR CONGRESS

Mailing Address 246 WEST HARDING

City SAN ANTONIO State TX Zip Code 78221

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
CIRO D. RODRIGUEZ

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

State: TX District: 23

Transaction ID: SB23.9314
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
COLLINS FOR SENATOR

Mailing Address 11 BAXTER BLVD

City PORTLAND State ME Zip Code 04104

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
Sen. SUSAN M COLLINS

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

State: ME District: 00

Transaction ID: SB23.9222
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 39

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MCHUGH	Transaction ID: SB23.9173 Date of Disbursement 07 / 30 / 2008
	Mailing Address 228 S. Washington St. SUITE B-20	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement CONTRIBUTION Candidate Name Sen. JOHN MCHUGH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT LORETTA SANCHEZ	Transaction ID: SB23.9240 Date of Disbursement 09 / 29 / 2008
	Mailing Address 604 SOUTH HARBOR BOULEVARD	Amount of Each Disbursement this Period 1000.00
	City SANTA ANA State CA Zip Code 92704	
	Purpose of Disbursement CONTRIBUTION Candidate Name LORETTA SANCHEZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) COMMITTEE TO REELECT CONGRESSMAN CHRIS SMITH	Transaction ID: SB23.9277 Date of Disbursement 09 / 29 / 2008
	Mailing Address P.O. Box 3184	Amount of Each Disbursement this Period 1000.00
	City Hamilton State NJ Zip Code 08619	
	Purpose of Disbursement CONTRIBUTION Candidate Name Rep. CHRISTOPHER H SMITH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 04	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS	Transaction ID: SB23.9206 Date of Disbursement
	Mailing Address 2901 DRUID PARK DRIVE #203	<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City BALTIMORE State MD Zip Code 21215	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Purpose of Disbursement CONTRIBUTION Candidate Name Rep. ELIJAH E CUMMINGS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
B.	Full Name (Last, First, Middle Initial) DAVID WU FOR US CONGRESS	Transaction ID: SB23.9297 Date of Disbursement
	Mailing Address 818 SW 3RD AVE #1182	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City PORTLAND State OR Zip Code 97204	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Purpose of Disbursement CONTRIBUTION Candidate Name DAVID WU Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
C.	Full Name (Last, First, Middle Initial) DEFAZIO FOR CONGRESS	Transaction ID: SB23.9302 Date of Disbursement
	Mailing Address PO BOX 1316	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City SPRINGFIELD State OR Zip Code 97477	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Purpose of Disbursement CONTRIBUTION Candidate Name PETER A DEFAZIO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
DONNA EDWARDS FOR CONGRESS

Mailing Address PO Box 441153

City FORT WASHINGTON State MD Zip Code 20749

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name
DONNA EDWARDS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MD District: 04

Transaction ID: SB23.9205

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address PO BOX 11101

City CINCINNATI State OH Zip Code 45211

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name
STEVEN LEO DRIEHAUS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.9293

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
EARL POMEROY FOR CONGRESS

Mailing Address P O BOX 9336

City FARGO State ND Zip Code 58106

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name
Rep. EARL RALPH POMEROY

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ND District: 00

Transaction ID: SB23.9292

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A.

Full Name (Last, First, Middle Initial)
FATTAH FOR CONGRESS

Mailing Address P. O. BOX 30743

City Philadelphia State PA Zip Code 19104

Purpose of Disbursement CONTRIBUTION

Candidate Name CHAKA FATTAH

Office Sought: House Senate President
State: PA District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.9304
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF FRANK WOLF

Mailing Address 2501 WISCONSIN AVE. NE #304

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement CONTRIBUTION

Candidate Name Rep. FRANK R WOLF

Office Sought: House Senate President
State: VA District: 10

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.9180
Date of Disbursement

07 / 30 / 2008

Amount of Each Disbursement this Period

5000.00

011
Category/
Type

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF JIM CLYBURN

Mailing Address 499 SOUTH CAPITOL STREET, SW SUITE 412

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CONTRIBUTION

Candidate Name Rep. JAMES E CLYBURN

Office Sought: House Senate President
State: SC District: 06

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.9313
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ►

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU	Transaction ID: SB23.9191 Date of Disbursement
	Mailing Address 5225 CANAL BOULEVARD	<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City NEW ORLEANS State LA Zip Code 70124	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION - N. Orleans, LA Dinner	<input type="text" value="2000.00"/>
	Candidate Name MARY L LANDRIEU	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF MAURICE HINCHEY	Transaction ID: SB23.9172 Date of Disbursement
	Mailing Address 10 G STREET NE SUITE 470	<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name Rep. MAURICE D HINCHEY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS	Transaction ID: SB23.9224 Date of Disbursement
	Mailing Address PO BOX 586	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City HELENA State MT Zip Code 59624	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="3000.00"/>
	Candidate Name Sen. MAX BAUCUS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
FRIENDS OF MAZIE HIRONO

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name Rep. MAZIE HIRONO

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

State: HI District: 02

Transaction ID: SB23.9196
Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF RAHM EMANUEL

Mailing Address P.O. Box 101124

City Chicago State IL Zip Code 60618

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name Rep. RAHM EMANUEL

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

State: IL District: 05

Transaction ID: SB23.9255
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

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

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name Rep. JIM GERLACH

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

State: PA District: 06

Transaction ID: SB23.9306
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS <hr/> Mailing Address PO BOX 12886 <hr/> City TUCSON State AZ Zip Code 85732 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name GABRIELLE GIFFORDS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9231 Date of Disbursement 09 / 29 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) GOODLATTE FOR CONGRESS <hr/> Mailing Address P. O. BOX 292 <hr/> City ROANOKE State VA Zip Code 24002 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name ROBERT W. GOODLATTE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9177 Date of Disbursement 07 / 30 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) HELLER FOR CONGRESS <hr/> Mailing Address PO BOX 750580 <hr/> City Las Vegas State NV Zip Code 89136 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name DEAN HELLER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9207 Date of Disbursement 08 / 28 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS</p> <p>Mailing Address 7905 MALCOLM ROAD SUITE 102</p> <p>City CLINTON State MD Zip Code 20735</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Rep. STENY HOYER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9166</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>0</td><td>7</td><td>/</td><td>3</td><td>0</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>5000.00</td> </tr> </table> </p> <p>011 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	3	0	/	2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	3	0	/	2	0	0	8													
5000.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box A</p> <p>City Harrisonville State MO Zip Code 64701</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Rep. IKE SKELTON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9167</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>0</td><td>7</td><td>/</td><td>3</td><td>0</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>1000.00</td> </tr> </table> </p> <p>011 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	3	0	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	3	0	/	2	0	0	8													
1000.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box A</p> <p>City Harrisonville State MO Zip Code 64701</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Rep. IKE SKELTON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9270</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>0</td><td>9</td><td>/</td><td>2</td><td>9</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>1000.00</td> </tr> </table> </p> <p>011 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	9	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	2	9	/	2	0	0	8													
1000.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) JESSE JACKSON JR. FOR CONGRESS	Transaction ID: SB23.9158 Date of Disbursement 07 / 30 / 2008
	Mailing Address 499 SOUTH CAPITOL ST SW SUITE 412	Amount of Each Disbursement this Period 2000.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement CONTRIBUTION Candidate Name Rep. JESSE JACKSON, Jr.	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JIM COSTA FOR CONGRESS	Transaction ID: SB23.9235 Date of Disbursement 09 / 29 / 2008
	Mailing Address 2037 WEST BULLARD SUITE #355	Amount of Each Disbursement this Period 1000.00
	City FRESNO State CA Zip Code 93711	
	Purpose of Disbursement CONTRIBUTION Candidate Name JIM COSTA	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) JOHANNES FOR U S SENATE	Transaction ID: SB23.9226 Date of Disbursement 09 / 29 / 2008
	Mailing Address 1201 O STREET SUITE 101	Amount of Each Disbursement this Period 2000.00
	City LINCOLN State NE Zip Code 68508	
	Purpose of Disbursement CONTRIBUTION Candidate Name MICHAEL O JOHANNES	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
JOHN SPRATT FOR CONGRESS

Mailing Address P O BOX 10986

City State Zip Code
ROCK HILL SC 29731

Purpose of Disbursement

CONTRIBUTION

Category/
Type

Candidate Name
Rep. JOHN SPRATT

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

State: SC District: 05

Transaction ID: SB23.9312

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
KAGEN 4 CONGRESS

Mailing Address 100 W. College Ave.
STE 50 D

City State Zip Code
Appleton WI 54911

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
Rep. STEVEN L KAGEN

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

State: WI District: 08

Transaction ID: SB23.9323

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
KANSANS FOR TIAHRT

Mailing Address 2250 N ROCK RD
#118A

City State Zip Code
WICHITA KS 67226

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
TODD TIAHRT

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

State: KS District: 04

Transaction ID: SB23.9259

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.

Full Name (Last, First, Middle Initial)
KLEIN FOR CONGRESS

Transaction ID: SB23.9252
Date of Disbursement

Mailing Address 2118 N FEDERAL HIGHWAY

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

City BOCA RATON State FL Zip Code 33431

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

011
Category/
Type

Candidate Name
RON KLEIN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 22

B.

Full Name (Last, First, Middle Initial)
KRATOVIL FOR CONGRESS

Transaction ID: SB23.9204
Date of Disbursement

Mailing Address PO BOX 518

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

City STEVENSVILLE State MD Zip Code 21666

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

011
Category/
Type

Candidate Name
FRANK M KRATOVIL, Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MD District: 01

C.

Full Name (Last, First, Middle Initial)
LINDA STENDER FOR CONGRESS

Transaction ID: SB23.9279
Date of Disbursement

Mailing Address P.O. Box 730

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

City Scotch Plains State NJ Zip Code 07076

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

011
Category/
Type

Candidate Name
LINDA STENDER

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 07

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial) MARKEY FOR CONGRESS <hr/> Mailing Address PO Box 1333 <hr/> City Fort Collins State CO Zip Code 80522 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name BETSY MARKEY <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9242 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 3000.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MATSUI FOR CONGRESS <hr/> Mailing Address PO BOX 1738 <hr/> City SACRAMENTO State CA Zip Code 95812 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name DORIS MATSUI <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9195 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MCMAHON FOR CONGRESS <hr/> Mailing Address 236 MASSACHUSETTS AVENUE NE <hr/> City WASHINGTON State DC Zip Code 20002 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name MICHAEL MCMAHON <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9219 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
MIKE ROGERS FOR CONGRESS

Mailing Address PO BOX 1113

City Anniston State AL Zip Code 36202

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name
Rep. MICHAEL ROGERS

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

State: AL District: 03

Transaction ID: SB23.9194

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

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

Mailing Address PO BOX 306

City Boise State ID Zip Code 83701

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name
WALTER CLIFFORD MINNICK

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

State: ID District: 01

Transaction ID: SB23.9198

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address PO BOX 14631

City SHAWNEE MISSION State KS Zip Code 66285

Purpose of Disbursement CONTRIBUTION

011
Category/
Type

Candidate Name
Rep. DENNIS MOORE

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

State: KS District: 03

Transaction ID: SB23.9258

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

<p>A. Full Name (Last, First, Middle Initial) MORAN FOR CONGRESS</p> <p>Mailing Address 311 N WASHINGTON STREET SUITE 200-L</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Rep. JIM MORAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: VA District: 08</p>	<p>Transaction ID: SB23.9179</p> <p>Date of Disbursement 07 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) NORM DICKS FOR CONGRESS</p> <p>Mailing Address PO BOX 1663</p> <p>City TACOMA State WA Zip Code 98401</p> <p>Purpose of Disbursement CONTRIBUTION- Dinner in Bremerton, WA</p> <p>Candidate Name Rep. NORM D DICKS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WA District: 06</p>	<p>Transaction ID: SB23.9193</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) PASCRELL FOR CONGRESS</p> <p>Mailing Address 38 IVY STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Rep. BILL J PASCRELL, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ District: 08</p>	<p>Transaction ID: SB23.9282</p> <p>Date of Disbursement 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058

Purpose of Disbursement

CONTRIBUTION

011
Category/
Type

Candidate Name
Rep. PATRICK J MURPHY

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.9308

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 1924 OAKWOOD STREET

City TEMPLE HILLS State MD Zip Code 20748

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
DONALD M PAYNE

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 10

Transaction ID: SB23.9286

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
PENNSYLVANIANS FOR KANJORSKI

Mailing Address 126 SOUTH FRANKLIN STREET

City WILKES-BARRE State PA Zip Code 18701

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
PAUL E KANJORSKI

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 11

Transaction ID: SB23.9309

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
PETE STARK RE-ELECTION COMM

Mailing Address PO BOX 8331

City FREEMONT State CA Zip Code 94537

Purpose of Disbursement CONTRIBUTION

Candidate Name Rep. PETE STARK

Office Sought: House Senate President

State: CA District: 13

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: SB23.9232

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

3000.00

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

Mailing Address PO Box 26087

City Las Vegas State NV Zip Code 89126

Purpose of Disbursement CONTRIBUTION

Candidate Name Rep. JON PORTER

Office Sought: House Senate President

State: NV District: 03

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: SB23.9276

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
ROTHMAN FOR NEW JERSEY

Mailing Address 209 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 07602

Purpose of Disbursement CONTRIBUTION

Candidate Name Rep. STEVEN R ROTHMAN

Office Sought: House Senate President

State: NJ District: 09

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: SB23.9357

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

A.	Full Name (Last, First, Middle Initial) SALAZAR FOR CONGRESS	Transaction ID: SB23.9243 Date of Disbursement 09 / 29 / 2008
	Mailing Address PO BOX 534	Amount of Each Disbursement this Period 1000.00
	City PUEBLO State CO Zip Code 81002	
	Purpose of Disbursement CONTRIBUTION Candidate Name JOHN SALAZAR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) SCHAKOWSKY FOR CONGRESS	Transaction ID: SB23.9256 Date of Disbursement 09 / 29 / 2008
	Mailing Address P.O. BOX 5130	Amount of Each Disbursement this Period 1000.00
	City EVANSTON State IL Zip Code 60204	
	Purpose of Disbursement CONTRIBUTION Candidate Name JANICE D SCHAKOWSKY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 09 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) SCHWARTZ FOR CONGRESS	Transaction ID: SB23.9311 Date of Disbursement 09 / 29 / 2008
	Mailing Address 201 LEEDOM STREET	Amount of Each Disbursement this Period 1000.00
	City JENKINTOWN State PA Zip Code 19046	
	Purpose of Disbursement CONTRIBUTION Candidate Name ALLYSON SCHWARTZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A.	Full Name (Last, First, Middle Initial) SIRES FOR CONGRESS	Transaction ID: SB23.9288 Date of Disbursement
	Mailing Address PO BOX 300	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="2008"/>
	City West New York State NJ Zip Code 07093	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name ALBIO SIRES	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SOLIS FOR CONGRESS	Transaction ID: SB23.9239 Date of Disbursement
	Mailing Address C/O THE ASHMEAD GROUP 233 MASSACHUSETTS AVE NE	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name HILDA SOLIS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA	Transaction ID: SB23.9324 Date of Disbursement
	Mailing Address PO Box 2009	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Sioux Falls State SD Zip Code 57101	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name Rep. STEPHANIE M HERSETH	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PA)

A. Full Name (Last, First, Middle Initial)
TEXANS FOR HENRY CUELLAR

Mailing Address PO BOX 6147

City Laredo State TX Zip Code 78042

Purpose of Disbursement CONTRIBUTION

Candidate Name HENRY R CUELLAR

Office Sought: House Senate President
State: TX District: 28

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.9316

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
THE NIKI TSONGAS COMMITTEE

Mailing Address PO Box 1454

City Lowell State MA Zip Code 01853

Purpose of Disbursement CONTRIBUTION

Candidate Name NICOLA TSONGAS

Office Sought: House Senate President
State: MA District: 05

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.9163

Date of Disbursement

07 / 30 / 2008

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
TIM JOHNSON FOR SOUTH DAKOTA

Mailing Address PO BOX 1536

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement CONTRIBUTION

Candidate Name Sen. TIM JOHNSON

Office Sought: House Senate President
State: SD District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.9230

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM
(NARFE-PA)

<p>A. Full Name (Last, First, Middle Initial) VAN HOLLEN FOR CONGRESS</p> <p>Mailing Address 10605 CONCORD STREET STE 202</p> <p>City KENSINGTON State MD Zip Code 20895</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Rep. CHRIS VAN HOLLEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9263</p> <p>Date of Disbursement 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) WALDEN FOR CONGRESS</p> <p>Mailing Address PO Box 1091</p> <p>City Hood River State OR Zip Code 97031</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name GREGORY PAUL WALDEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9299</p> <p>Date of Disbursement 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) WEXLER FOR CONGRESS</p> <p>Mailing Address 2500 NORTH MILITARY TRAIL STE 251</p> <p>City BOCA RATON State FL Zip Code 33431</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name ROBERT WEXLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9351</p> <p>Date of Disbursement 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

8000.00

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

127000.00