

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
Capital One Financial Corp. Assoc. Political Fund

ADDRESS (number and street) 1680 Capital One Drive
Attn: 19050-1204
 Check if different than previously reported. (ACC)
McLean VA 22102

2. **FEC IDENTIFICATION NUMBER** C00326595
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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2005 through 06 30 2005

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 Richard Olson
Signature of Treasurer Electronically Filed by Richard Olson Date 02 23 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Capital One Financial Corp. Assoc. Political Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		153982.28
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	153982.28									
(c) Total Receipts (from Line 19)	292828.13	292828.13								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	446810.41	446810.41								
7. Total Disbursements (from Line 31)	214955.10	214955.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	231855.31	231855.31								
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
Capital One Financial Corp. Assoc. Political Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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	289076.39	289076.39
(i) Itemized (use Schedule A)	3751.74	3751.74
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	292828.13	292828.13
(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)	292828.13	292828.13
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	292828.13	292828.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	292828.13	292828.13

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.....	5.10	5.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	5.10	5.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	209950.00	209950.00
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.....	5000.00	5000.00
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))..	214955.10	214955.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	214955.10	214955.10

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)	292828.13	292828.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	292828.13	292828.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.10	5.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5.10	5.10

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Michael T. Yamamoto

Mailing Address 12113 Morestead Court

City State Zip Code
Glen Allen VA 23059

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

Name of Employer Capital One Occupation VP, MIS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 0 5

Transaction ID: 10569373

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
Mayo A. Shattuck, III

Mailing Address 20 Blythewood Road

City State Zip Code
Baltimore MD 21210

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

Name of Employer Capital One Occupation Board of Directors/Stockholder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 0 5

Transaction ID: 10677184

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Carl R. Fairbank

Mailing Address 1403 Langley Place

City State Zip Code
McLean VA 22101

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

Name of Employer Student Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: 10712814

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	13000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 107						
	(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

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Brian W. Fairbank		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 5	
Mailing Address 1403 Langley Place		Transaction ID: 10712815	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Student Occupation Student	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Richard D Fairbank		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 5	
Mailing Address 1403 Langley PI		Transaction ID: 10712816	
City State Zip Code Mclean VA 22101	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One Occupation Chairman/CEO	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Christine U. Fairbank		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 5	
Mailing Address 1403 Langley Place		Transaction ID: 10712817	
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. John Finneran		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 5	
Mailing Address 16 Magnolia Parkway		Transaction ID: 10712818	
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation EVP, Gen Counsel & Corp Sec		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Lewis Hay		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 5	
Mailing Address 13220 Marsh Landing		Transaction ID: 10712819	
City State Zip Code Palm Beach Gardens FL 33418	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation Board of Directors/Stockholder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Jerome Miles Reidy		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 5	
Mailing Address 12725 Maryvale Court		Transaction ID: 10763370	
City State Zip Code Ellicott City MD 21042	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Finance & Accounting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	13000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Ann Fritz Hackett		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2005
Mailing Address 1110 Brook Valley Lane		Transaction ID: 10781710
City McLean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Horizon Consulting Group	Occupation President and Capital One Board of Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ryan Schneider		Date of Receipt M M / D D / Y Y Y Y Y 03 / 04 / 2005
Mailing Address 5901 Dorrington Circle		Transaction ID: 10781711
City Glen Allen	State VA	Zip Code 23059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Capital One	Occupation SVP, Strategic Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Warrenetta Baker		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2005
Mailing Address 6832 Capri Place		Transaction ID: 10801062
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Capital One	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	▶	10750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 107						
	(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

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Scott Davenport		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2005	
Mailing Address 7802 Aberdeen Road		Transaction ID: 10801063	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Enterprise Risk Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. Jean Traub		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2005	
Mailing Address 1725 Stonebridge Rd		Transaction ID: 10801064	
City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation Assistant General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Lee Congdon		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2005	
Mailing Address 10 Ramsey Drive		Transaction ID: 10801065	
City State Zip Code Summit NJ 07901	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Sr. BIO of IT Corporate Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Marla Schnall

Mailing Address 6703 Moly Drive

City Falls Church State VA Zip Code 22046

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 15 / 2005

Transaction ID: 10801067

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
James A. Flick, Jr.

Mailing Address 3125 Blendon Road

City Owings Mills State MD Zip Code 21117

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

Name of Employer Capital One Occupation Board of Directors/Stockholder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2005

Transaction ID: 10801068

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
Matthew W. Schuyler

Mailing Address 3720 Raboli Street

City Pleasanton State CA Zip Code 94566

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

Name of Employer Capital One Occupation SVP, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 16 / 2005

Transaction ID: 10801069

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. David Lawson		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2005	
Mailing Address 5628 Bent Creek Tr		Transaction ID: 10801070	
City State Zip Code Dallas TX 75252		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Capital One President/ CEO - COAF			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Leslie L. Lawson		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2005	
Mailing Address 5628 Bent Creek Trail		Transaction ID: 10801071	
City State Zip Code Dallas TX 75252		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Gary L. Perlin		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2005	
Mailing Address 10301 Firefly Circle		Transaction ID: 10832776	
City State Zip Code Fairfax Station VA 22039		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Capital One CFO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Donald Jean		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2005	
Mailing Address 11516 Ivy Home Terrace		Transaction ID: 10832782	
City State Zip Code Richmond VA 23233		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One		Occupation SVP, Strategic Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jeffrey R. Leopold		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2005	
Mailing Address 11504 Longview Landing Drive		Transaction ID: 10832784	
City State Zip Code Richmond VA 23233		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One		Occupation VP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Jo Kittner		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2005	
Mailing Address 4700 New Kent Hwy		Transaction ID: 10832785	
City State Zip Code Quinton VA 23141		Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One		Occupation Group Manager, Gov. Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
David B. Pahren

Mailing Address 815 Westham Parkway

City Richmond State VA Zip Code 23229

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

Name of Employer Capital One Occupation Senior Financial Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2005

Transaction ID: 10832787

Amount of Each Receipt this Period
 600.00

B. Full Name (Last, First, Middle Initial)
Judith Wagoner Pahren

Mailing Address 815 Westham Pkwy

City Richmond State VA Zip Code 23229

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

Name of Employer Capital One Occupation Director, Customer Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2005

Transaction ID: 10832788

Amount of Each Receipt this Period
 3000.00

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

Mailing Address 7608 Arrowood Road

City Bethesda State MD Zip Code 20817

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

Name of Employer Capital One Occupation VP, Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2005

Transaction ID: 10867487

Amount of Each Receipt this Period
 3000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 107
	<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	

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Sanjiv Yajnik		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2005	
Mailing Address 424 Weston Way		Transaction ID: 10867542	
City Richmond	State VA	Zip Code 23233	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Marketing & Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Theresa Y. Hong		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2005	
Mailing Address 6653 Sorrel Street		Transaction ID: 10867598	
City McLean	State VA	Zip Code 22101	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Richard D. Daniels		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2005	
Mailing Address 6004 Blossom Court		Transaction ID: 10867644	
City McKinney	State TX	Zip Code 75070	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Information Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Richard A. Woods		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2005	
Mailing Address 9212 White Chimney Lane		Transaction ID: 10867701	
City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Corporate Communications		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Marjorie Mary Connelly		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2005	
Mailing Address 440 Rivergate Dr.		Transaction ID: 10867799	
City State Zip Code Richmond VA 23238	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One Financial	Occupation EVP, Credit Card Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Richard Silverthorne		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2005	
Mailing Address 10404 Towlston Rd		Transaction ID: 10867868	
City State Zip Code Fairfax VA 22030	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation Director, Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	6200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Jack Forestell		Date of Receipt MM / DD / YYYY 03 / 24 / 2005
Mailing Address 13266 Apdon Court		Transaction ID: 10867917
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2250.00
Name of Employer Capital One	Occupation VP, Marketing & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) B. Derek C. Mohar		Date of Receipt MM / DD / YYYY 03 / 31 / 2005
Mailing Address 5280 N. 36th Street		Transaction ID: 10868060
City Boise	State ID	Zip Code 83703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Capital One	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Katherine E. Busser		Date of Receipt MM / DD / YYYY 03 / 30 / 2005
Mailing Address 3705 Favero Road		Transaction ID: 10912406
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer Capital One	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Kevin J. Goldstein		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2005	
Mailing Address 13248 Barwick Lane		Transaction ID: 10912407	
City Richmond	State VA	Zip Code 23233	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Marketing & Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. Kerri A. Palmer		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2005	
Mailing Address 1001 Sir Lancelot Circle		Transaction ID: 10912409	
City Lewisville	State TX	Zip Code 75056	Amount of Each Receipt this Period 800.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. William J. West		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2005	
Mailing Address 5912 Cedar Parkway		Transaction ID: 10912410	
City Chevy Chase	State MD	Zip Code 20815	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer IBM	Occupation Marketing Executive/Stockholder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	8800.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Thomas A. York

Mailing Address 10218 Maremont Circle

City Richmond State VA Zip Code 23233

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

Name of Employer Capital One Occupation Director, Operations Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

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

Transaction ID: 10912411

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Jonah E. Perlin

Mailing Address 10301 Firefly Circle

City Fairfax Station State VA Zip Code 22039

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

Name of Employer Student Occupation Student/ Stockholder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 0 6 / 2 0 0 5

Transaction ID: 10912412

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
Catherine A. Cotter

Mailing Address 16 Magnolia Parkway

City Chevy Chase State MD Zip Code 20815

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: 10928274

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)	▶	11500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Terence Chu		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 5
Mailing Address 5637 Country Hills Lane		Transaction ID: 10928275
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Capital One	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jerry A. Fiala		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 5
Mailing Address 6100 Olde Hartley Place		Transaction ID: 10928276
City State Zip Code Glen Allen VA 23060	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Capital One	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Thomas E. Emerson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address 1469 Hampton Ridge Drive		Transaction ID: 10992456
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Capital One	Occupation SVP, Chief Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Sanjiv Yajnik		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 5	
Mailing Address 424 Weston Way		Transaction ID: 10992458	
City Richmond	State VA	Zip Code 23233	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Marketing & Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Ruth Westreich		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 5	
Mailing Address P.O. Box 3601		Transaction ID: 11118216	
City Rancho Santa Fe	State CA	Zip Code 92067	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Stanley Westreich		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 5	
Mailing Address P.O. Box 3601		Transaction ID: 11118217	
City Rancho Santa Fe	State CA	Zip Code 92067	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation Board of Directors/Stockholder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Brian Reed		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 5	
Mailing Address 1406 Laurel Lane		Transaction ID: 11118218	
City State Zip Code Southlake TX 76092	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. Patrick E. Cataldo		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 5	
Mailing Address 5425 Hillshire Way		Transaction ID: 11249465	
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation Group Manager, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. David Jeppesen		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 5	
Mailing Address 10557 Farm Meadow Drive		Transaction ID: 11263958	
City State Zip Code Glen Allen VA 23060	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Statistical Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Juan Enrique Yrausquin

Mailing Address 42544 Mayflower Terrace

City State Zip Code
Ashburn VA 20148

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

Name of Employer Strategic Support Occupation Legal Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2005

Transaction ID: 11263960

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Lawrence J. Stein

Mailing Address 6503 Heather Brook Ct

City State Zip Code
McLean VA 22101

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

Name of Employer Policy Affairs Occupation SVP, Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y

Transaction ID: PR1000609915155

Amount of Each Receipt this Period
2000.00

P/R Deduction (\$208.33 Se-
mi-Monthly)

C. Full Name (Last, First, Middle Initial)
Michael Glotz

Mailing Address 12605 Wheat Ter

City State Zip Code
Richmond VA 23233

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

Name of Employer Chief Auditor Occupation Managing VP, Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y

Transaction ID: PR1001510315155

Amount of Each Receipt this Period
750.00

P/R Deduction (\$62.50 Sem-
i-Monthly)

SUBTOTAL of Receipts This Page (optional)	3750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. John Fassl		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1001510415155	
Mailing Address 14014 Saddle River Dr		Amount of Each Receipt this Period 750.00	
City North Potomac	State MD	Zip Code 20878	P/R Deduction (\$62.50 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 750.00	
Name of Employer Compliance - Central Services	Occupation VP, Enterprise Risk Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Kevin Mason		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1001510515155	
Mailing Address 13501 Rivermist Road		Amount of Each Receipt this Period 375.00	
City Midlothian	State VA	Zip Code 23113	P/R Deduction (\$31.25 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 375.00	
Name of Employer Data Risk Management	Occupation VP, IT Data Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ruth Clay		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1012199615155	
Mailing Address 12100 Loxton Court		Amount of Each Receipt this Period 252.00	
City Glen Allen	State VA	Zip Code 23059	P/R Deduction (\$21.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 252.00	
Name of Employer Client Support - Banking	Occupation VP, HR Client Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1377.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) P Thurmond Mailing Address 755 N. Troutner Way City State Zip Code Boise ID 83712 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1012199715155 Amount of Each Receipt this Period 375.00 P/R Deduction (\$31.25 Semi-Monthly)
Name of Employer Occupation Capital One Director, Operations Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 375.00		

B. Full Name (Last, First, Middle Initial) Laura A. Lorenzen Mailing Address 12601 Shadow Run Blvd. City State Zip Code Riverview FL 33569 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1024739115155 Amount of Each Receipt this Period 875.00 P/R Deduction (\$125.00 Bi-Weekly)
Name of Employer Occupation HR/CRE Direct - Restructuring VP, Human Resources Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 875.00		

C. Full Name (Last, First, Middle Initial) Steve Arneson Mailing Address 1425 Hague Drive City State Zip Code Leesburg VA 20175 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1036126515155 Amount of Each Receipt this Period 1000.20 P/R Deduction (\$83.35 Semi-Monthly)
Name of Employer Occupation Executive Development SVP, Human Resources Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.20		

SUBTOTAL of Receipts This Page (optional)	2250.20
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 107						
	(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

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Steven Zykoski		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 103 Durrington Ct		Transaction ID: PR1036126715155	
City Richmond	State VA	Zip Code 23236	Amount of Each Receipt this Period _____ 400.08
FEC ID number of contributing federal political committee. C _____			
Name of Employer Infrastructure finance	Occupation Director, Financial Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.08		
		P/R Deduction (\$33.34 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Douglas J. Taylor		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 12209 Hampton Valley Turn		Transaction ID: PR1036133415155	
City Chesterfield	State VA	Zip Code 23832	Amount of Each Receipt this Period _____ 400.08
FEC ID number of contributing federal political committee. C _____			
Name of Employer Up Market Account Mgmt	Occupation Sr Business Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.08		
		P/R Deduction (\$33.34 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. Chris Webb		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1912 Esquire Road		Transaction ID: PR1039328415155	
City Richmond	State VA	Zip Code 23235	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Marketing Platforms	Occupation Manager, Project Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1100.16
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Sarah Gravitt-Baese		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039328515155	
Mailing Address 4316 Cutshaw Ave.		Amount of Each Receipt this Period 624.00	
City Richmond State VA Zip Code 23230	FEC ID number of contributing federal political committee. C		
Name of Employer Brand US Card Strategy Occupation VP, Brand Marketing	Aggregate Year-to-Date ▼ 624.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$73.00 Semi-Monthly)		

Full Name (Last, First, Middle Initial) B. Jack Forestell		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039328615155	
Mailing Address 13266 Apdon Court		Amount of Each Receipt this Period 750.00	
City Richmond State VA Zip Code 23233	FEC ID number of contributing federal political committee. C		
Name of Employer Capital One Occupation VP, Marketing & Analysis	Aggregate Year-to-Date ▼ 3000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$125.00 Semi-Monthly)		

Full Name (Last, First, Middle Initial) C. Greg Gordon		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039328715155	
Mailing Address 5417 Tuckahoe Ave		Amount of Each Receipt this Period 375.00	
City Richmond State VA Zip Code 23226	FEC ID number of contributing federal political committee. C		
Name of Employer Capital One Occupation Director, Brand Management	Aggregate Year-to-Date ▼ 375.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$31.25 Semi-Monthly)		

SUBTOTAL of Receipts This Page (optional) ▶	1749.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Ashish Masih		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 11609 Hearthstone Drive		Transaction ID: PR1039328915155
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period _____ 600.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Legal Administration	Occupation VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

Full Name (Last, First, Middle Initial) B. Melissa Monk		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2923 Monument Avenue Condo 1		Transaction ID: PR1039329015155
City State Zip Code Richmond VA 23221	Amount of Each Receipt this Period _____ 600.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Operations and Infrastructure	Occupation VP, Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

Full Name (Last, First, Middle Initial) C. Howard Phillips		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 9722 Cragmont Drive		Transaction ID: PR1039329215155
City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period _____ 996.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$83.00 Semi-Monthly)
Name of Employer Decisioning Platforms	Occupation VP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 996.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 2196.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Lynne Laube		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2913 Calcutt Drive		Transaction ID: PR1039329515155	
City State Zip Code Midlothian VA 23113	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$62.50 Semi-Monthly)	
Name of Employer Payments M&A	Occupation VP, Operations Analysis	Aggregate Year-to-Date _____ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		_____	

Full Name (Last, First, Middle Initial) B. Charles Rosenblatt		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address Avalon at Mission Bay 255 Kina Street		Transaction ID: PR1040336515155	
City State Zip Code San Francisco CA 94107	Amount of Each Receipt this Period _____ 418.20		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$31.82 Semi-Monthly)	
Name of Employer Subprime Account Management	Occupation Sr. Mktng An Business Manager	Aggregate Year-to-Date _____ 418.20	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		_____	

Full Name (Last, First, Middle Initial) C. Scott Barton		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 11420 Harcourt Ter		Transaction ID: PR1040336615155	
City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period _____ 1500.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.00 Semi-Monthly)	
Name of Employer Capital One	Occupation SVP, Operations	Aggregate Year-to-Date _____ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		_____	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 2668.20
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Beth Miksa		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1055110815155	
Mailing Address 11613 Alder Ridge Ct		Amount of Each Receipt this Period 1298.52	
City State Zip Code Glen Allen VA 23059	FEC ID number of contributing federal political committee. C		
Name of Employer Occupation CRE BIO Director, HR	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1298.52		
P/R Deduction (\$108.21 Bi-Weekly)			

Full Name (Last, First, Middle Initial) B. Susan Batura		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1067721115155	
Mailing Address 219 East Brook Run Drive		Amount of Each Receipt this Period 2496.00	
City State Zip Code Richmond VA 23238	FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Audit - US Card and GFS VP, Audit Operations	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2496.00		
P/R Deduction (\$208.00 Semi-Monthly)			

Full Name (Last, First, Middle Initial) C. Robert Rose		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1076522815155	
Mailing Address 9629 Parkwood Drive		Amount of Each Receipt this Period 480.00	
City State Zip Code Bethesda MD 20814	FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Associate Compensation SVP, Human Resources	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 480.00		
P/R Deduction (\$40.00 Semi-Monthly)			

SUBTOTAL of Receipts This Page (optional) ▶	4274.52
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Sallie Larsen		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 7300 Hooking Road		Transaction ID: PR1076522915155
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer HR Communications	Occupation Managing VP, Human Resources	P/R Deduction (\$62.50 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Theodore Forbes		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 110 Overlook Dr		Transaction ID: PR1081446515155
City Charlottesville	State VA	Zip Code 22903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Capital One University	Occupation Managing VP, Human Resources	P/R Deduction (\$62.50 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Nicole West		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4114 Emery PI N.W.		Transaction ID: PR1083048315155
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer GFS Management	Occupation VP, Chief of Staff	P/R Deduction (\$21.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	▶	1752.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. James Campbell		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1086858515155	
Mailing Address 7359 Jefferson Mill Road		Amount of Each Receipt this Period 1500.00	
City State Zip Code Scottsville VA 24590	FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Occupation US Card Finance SVP, Finance	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. Larry Ebert		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1090232815155	
Mailing Address 8 Tapoan Road		Amount of Each Receipt this Period 1500.00	
City State Zip Code Richmond VA 23226	FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Occupation AS - Org Effectiveness Managing VP, Corp Real Estate	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Terrance Edwards		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1090232915155	
Mailing Address 12160 Morestead Ct		Amount of Each Receipt this Period 240.00	
City State Zip Code Glen Allen VA 23059	FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Occupation Performance Mgmt T5-8 Director Operations	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	3240.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Michael Zamsky		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1350 Beverly Road #1204		Transaction ID: PR1090233015155	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period _____ 1500.00		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$125.00 Semi-Monthly)		
Name of Employer Occupation RM - Chief of Staff Chief Consumer Credit Officer	Aggregate Year-to-Date ▼ _____ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mayur Maniar		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2719 Robaleed Way		Transaction ID: PR1090233115155	
City State Zip Code Herndon VA 20171	Amount of Each Receipt this Period _____ 780.00		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$0.00 Semi-Monthly)		
Name of Employer Occupation Capital One VP, Marketing & Analysis	Aggregate Year-to-Date ▼ _____ 780.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Kent Ivanoff		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5605 Hunter's Glen Drive		Transaction ID: PR1090233215155	
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period _____ 2166.66		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$208.33 Semi-Monthly)		
Name of Employer Occupation Mainstreet Management EVP, Business Analysis	Aggregate Year-to-Date ▼ _____ 2166.66		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 4446.66
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. James Reo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1090233315155	
Mailing Address 3141 N Pollard St		Amount of Each Receipt this Period 540.00	
City Arlington	State VA	Zip Code 22207	P/R Deduction (\$45.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Executive & Campus Recruiting	Occupation VP, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00		

Full Name (Last, First, Middle Initial) B. Charles Clark		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1091968515155	
Mailing Address 3023 Macomb St NW		Amount of Each Receipt this Period 750.00	
City Washington	State DC	Zip Code 20008	P/R Deduction (\$62.50 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Litigation Group	Occupation Managing VP, Chief Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Sivakumar Gowrishankar		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1091968615155	
Mailing Address 10006 Stonemill Rd		Amount of Each Receipt this Period 750.00	
City Richmond	State VA	Zip Code 23233	P/R Deduction (\$62.50 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Upmarket Acquisition	Occupation VP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional) ▶	2040.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Robert Turner		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1091968715155	
Mailing Address 2107 Mount Blanco Rd		Amount of Each Receipt this Period 504.00	
City Chester	State VA	Zip Code 23836	P/R Deduction (\$42.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 504.00	
Name of Employer ETO Administration	Occupation SVP, Information Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Troy Jamison		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1096508415155	
Mailing Address 11713 Shadow Run Lane		Amount of Each Receipt this Period 420.00	
City Glen Allen	State VA	Zip Code 23059	P/R Deduction (\$35.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 420.00	
Name of Employer Mainstreet Customer Acquisition	Occupation VP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mark Becker		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1096508515155	
Mailing Address 4712 Hearthstone		Amount of Each Receipt this Period 300.00	
City Glen Allen	State VA	Zip Code 23059	P/R Deduction (\$25.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 300.00	
Name of Employer Client Support - Card Mgmt	Occupation Sr. Dir., HR Client Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	1224.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Michael Barry		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 12305 Sentury Meadow Dr		Transaction ID: PR1096508615155
City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Capital One	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 250.00	
		P/R Deduction (\$62.50 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Michael Fowler		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1146 Round Pebble		Transaction ID: PR1096508715155
City State Zip Code Reston VA 20194	Amount of Each Receipt this Period _____ 300.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Global Finance - Restructuring	Occupation SF-Strategic Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	
		P/R Deduction (\$-25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Douglas Wall		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2511 Northwind Place		Transaction ID: PR1096508815155
City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period _____ 750.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Compliance - Central Services	Occupation VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00	
		P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1300.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Victoria Mirandah		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103674815155
Mailing Address 11600 Aprilbud Drive		Amount of Each Receipt this Period 399.96
City Richmond State VA Zip Code 23233	FEC ID number of contributing federal political committee. C	
Name of Employer Diversity Occupation Director, HR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 399.96	
		P/R Deduction (\$33.33 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Roldy Leyva		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103674915155
Mailing Address 5348 Nagami Drive		Amount of Each Receipt this Period 400.08
City Windermere State FL Zip Code 34786	FEC ID number of contributing federal political committee. C	
Name of Employer Capital One Financial Occupation HR Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.08	
		P/R Deduction (\$33.34 Weekly)

Full Name (Last, First, Middle Initial) C. Richard Abel		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1113895415155
Mailing Address 3 Ramapo Trail		Amount of Each Receipt this Period 375.00
City Somerville State NJ Zip Code 08876	FEC ID number of contributing federal political committee. C	
Name of Employer Auto Finance - NorthEast Div. Occupation Director, Divisional Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	
		P/R Deduction (\$31.25 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	1175.04
TOTAL This Period (last page this line number only)	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 107
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Elisabeth Bresee		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1119162915155
Mailing Address 910 Peacock Station Road		Amount of Each Receipt this Period 375.00
City McLean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C		P/R Deduction (\$31.25 Semi-Monthly)
Name of Employer Policy Affairs	Occupation VP, Sr. Associate Genl Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. Leonard Roseman		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1119163015155
Mailing Address 3314 Grove Ave		Amount of Each Receipt this Period 750.00
City Richmond	State VA	Zip Code 23221-2818
FEC ID number of contributing federal political committee. C		P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer CRM - IBS Transformation	Occupation VP, Statistical Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Todd Kennedy		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1125784015155
Mailing Address 660 Washington St Apt 8H		Amount of Each Receipt this Period 625.00
City Boston	State MA	Zip Code 02111
FEC ID number of contributing federal political committee. C		P/R Deduction (\$72.92 Semi-Monthly)
Name of Employer COHF General & Admin	Occupation Managing VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Marsha King		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8600 Garnet Rock Gate		Transaction ID: PR1133064415155	
City State Zip Code Laurel MD 20723	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Client Support - Staff Fns	Occupation Managing VP, HR Client Cnsltng		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00		P/R Deduction (\$-1125.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Amy Baumgardner		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2935 Tennyson Street NW		Transaction ID: PR1137262515155	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period _____ 350.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer CRG - Restructuring	Occupation VP, Sr. Associate Genl Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 350.00		P/R Deduction (\$105.00 Se-mi-Monthly)

Full Name (Last, First, Middle Initial) C. Frank Rotman		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 917 Merchant Lee Place		Transaction ID: PR1143077615155	
City State Zip Code Manakin Sabot VA 23103	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Capital One	Occupation Installment Loan		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		P/R Deduction (\$125.00 Se-mi-Monthly)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Polly Nyquist		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3018 O Street, N.W.		Transaction ID: PR1143077815155	
City Washington	State DC	Zip Code 20007	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Strategic Support	Occupation Managing VP, Chief Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Matthew Bohnert		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 668 N Morningside Way		Transaction ID: PR1143077915155	
City Boise	State ID	Zip Code 83712	Amount of Each Receipt this Period _____ 360.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Capital One	Occupation CRS Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00		
		P/R Deduction (\$60.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. Raymond Frigo		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2711 Remington Road		Transaction ID: PR1143078015155	
City Oakton	State VA	Zip Code 22124	Amount of Each Receipt this Period _____ 252.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer UK Operations Mgmt	Occupation SVP, Information Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 252.00		
		P/R Deduction (\$42.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 912.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Michael Dobbins		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6203 Bristol Place		Transaction ID: PR1143078115155
City State Zip Code Frisco TX 75034	Amount of Each Receipt this Period _____ 750.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Retail Banking Integration	Occupation SVP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00	P/R Deduction (\$125.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Christopher Curtis		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6017 Madawaska Road		Transaction ID: PR414959515155
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period _____ 750.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Policy Affairs	Occupation Sr Director, Assoc Gen. Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00	P/R Deduction (\$33.33 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Frank LaPrade		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6440 Wiscasset Road		Transaction ID: PR414959915155
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period _____ 1500.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Senior Management	Occupation EVP, Chief of Staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1500.00	P/R Deduction (\$125.00 Semi-Monthly)

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

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

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

FOR LINE NUMBER: PAGE 42 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Frank Borchert

Mailing Address 9813 Thunderhill Ct

City State Zip Code
Great Falls VA 22066

FEC ID number of contributing federal political committee. C

Name of Employer Legal Management Occupation EVP, Deputy General Counsel

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2496.00

Date of Receipt M M / D D / Y Y Y Y Y
Transaction ID: PR414960015155

Amount of Each Receipt this Period 2496.00

P/R Deduction (\$208.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
David Tyler

Mailing Address 5097 Little Falls Road

City State Zip Code
Arlington VA 22207

FEC ID number of contributing federal political committee. C

Name of Employer Integration Occupation Managing VP, Project Management

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2499.96

Date of Receipt M M / D D / Y Y Y Y Y
Transaction ID: PR414960315155

Amount of Each Receipt this Period 2499.96

P/R Deduction (\$208.33 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
Celeste Watson

Mailing Address 9203 Griggs Road
Unit C-201

City State Zip Code
Englewood FL 34224

FEC ID number of contributing federal political committee. C

Name of Employer Capital One Occupation Director, HR

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y
Transaction ID: PR414960915155

Amount of Each Receipt this Period 240.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 5235.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Marjorie Mary Connelly		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414961215155
Mailing Address 440 Rivergate Dr.		Amount of Each Receipt this Period 2400.00
City Richmond State VA Zip Code 23238		
FEC ID number of contributing federal political committee. C		
Name of Employer Capital One Financial	Occupation EVP, Credit Card Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	
		P/R Deduction (\$200.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Neil Cohen		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414962015155
Mailing Address 3199 Wheatland Farms Drive		Amount of Each Receipt this Period 390.00
City Oakton State VA Zip Code 22124		
FEC ID number of contributing federal political committee. C		
Name of Employer Capital One	Occupation Executive Coach	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
		P/R Deduction (\$32.50 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Kenneth Cirillo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414962215155
Mailing Address 418 Weston Way		Amount of Each Receipt this Period 300.00
City Richmond State VA Zip Code 23238		
FEC ID number of contributing federal political committee. C		
Name of Employer Executive Coaching	Occupation VP, Executive Coach	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	3090.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Murray Abrams

Mailing Address 10208 Bencross Dr

City Potomac State MD Zip Code 20854

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

Name of Employer US Corp Dev Transactions Group Occupation EVP, Business Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR414962515155

Amount of Each Receipt this Period
760.00

P/R Deduction (\$150.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
Douglas Pick

Mailing Address 11720 Paddock Drive Apt. 103-2

City Midlothian State VA Zip Code 23113

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

Name of Employer US Card TOH Adjustments Occupation VP, Project Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR414962615155

Amount of Each Receipt this Period
750.00

P/R Deduction (\$62.50 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
Kenneth Aversa

Mailing Address 3708 Ivory Terrace

City Richmond State VA Zip Code 23233

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

Name of Employer Customer Solutions Admin Occupation Managing VP, Enterprise Rsk Mgt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR414962715155

Amount of Each Receipt this Period
384.00

P/R Deduction (\$32.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	1894.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Roberta Douma		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 305 Westham Parkway		Transaction ID: PR414962915155	
City State Zip Code Richmond VA 23229	Amount of Each Receipt this Period _____ 996.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Executive Coaching	Occupation VP, Executive Coach		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 996.00		
		P/R Deduction (\$83.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. William Andrews		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8914 Tolman Rd		Transaction ID: PR414963015155	
City State Zip Code Richmond VA 23229	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Bank Retail Integration	Occupation Managing VP, Ops Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. Eric Nelson		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 100 Berkshire Road		Transaction ID: PR414963315155	
City State Zip Code Richmond VA 23221	Amount of Each Receipt this Period _____ 360.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer CMC Support	Occupation Managing VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00		
		P/R Deduction (\$30.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1656.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: PAGE 46 / 107

(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Cathryne Doss		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9024 Pamunkey River Farms Dr		Transaction ID: PR414963815155	
City State Zip Code Mechanicsville VA 23111	Amount of Each Receipt this Period _____ 1084.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Cardholder Enhancements - IT	Occupation Managing VP, IT Data Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1084.98		
		P/R Deduction (\$159.58 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Mitchell Beres		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9903 Emerald Links Dr.		Transaction ID: PR414963915155	
City State Zip Code Tampa FL 33626	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation VP, Risk Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$62.50 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. William McDonald		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8019 Greenwich Woods Dr		Transaction ID: PR414964315155	
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period _____ 2499.96		
FEC ID number of contributing federal political committee. C			
Name of Employer Senior Management	Occupation EVP, Brand		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2499.96		
		P/R Deduction (\$208.33 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional)	_____ 4334.94
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

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

Mailing Address 5701 Little Spring

City State Zip Code
Derwood MD 20855

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

Name of Employer Treasury Administration Occupation EVP, Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR415000215155

Amount of Each Receipt this Period
825.00

P/R Deduction (\$100.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
Jory Berson

Mailing Address 338 Perrow Lane

City State Zip Code
Manakin-Sabot VA 23103

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

Name of Employer Senior Management Occupation President, US Card

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR415012515155

Amount of Each Receipt this Period
625.00

P/R Deduction (\$208.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
Peter Schnall

Mailing Address 6703 Moly Drive

City State Zip Code
Falls Church VA 22046

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

Name of Employer Senior Management Occupation Chief Risk Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.96

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR415012615155

Amount of Each Receipt this Period
2499.96

P/R Deduction (\$208.33 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	3949.96
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Vance Gudmundsen		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 903 Falls Bridge Lane		Transaction ID: PR415026515155
City State Zip Code Great Falls VA 22066-1347	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 399.96
Name of Employer Capital One	Occupation Director, Asst General Counsel	P/R Deduction (\$0.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.96	

Full Name (Last, First, Middle Initial) B. Ronald Massey		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 901 Kingham Drive		Transaction ID: PR415032215155
City State Zip Code Midlothian VA 23114	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.04
Name of Employer Capital One	Occupation Director, HR Client Consulting	P/R Deduction (\$41.67 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name (Last, First, Middle Initial) C. Jeffrey Heslop		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 8401 W. Hildy Ct.		Transaction ID: PR415088415155
City State Zip Code Spotsylvania VA 22553	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 630.00
Name of Employer ITRO	Occupation Managing VP, IT	P/R Deduction (\$65.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

SUBTOTAL of Receipts This Page (optional)	1530.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Daniel Friedman		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415114415155
Mailing Address 3702 Holland Avenue #2		Amount of Each Receipt this Period 1500.00
City State Zip Code Dallas TX 75219	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Dealer M&A Occupation SVP, Business Analysis	Aggregate Year-to-Date 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Robert Alexander		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415154315155
Mailing Address 9925 Eildonway Pl.		Amount of Each Receipt this Period 1200.00
City State Zip Code Richmond VA 23238	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer ECM General Management Occupation EVP, Business Analysis	Aggregate Year-to-Date 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Kathy Collier		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415561615155
Mailing Address 16118 Mabry Mill Drive		Amount of Each Receipt this Period 264.00
City State Zip Code Midlothian VA 23113	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer UFO Support- Admin Occupation Managing VP, Operations	Aggregate Year-to-Date 264.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	2964.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Daniel Mortensen Mailing Address 9515 Carterwood Ct City Richmond State VA Zip Code 23229 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415695615155 Amount of Each Receipt this Period 1500.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer AS - Org Effectiveness Occupation SVP, Facilities Mgt/Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B. Full Name (Last, First, Middle Initial) David Wasik Mailing Address 3817 Houndstooth Court City Richmond State VA Zip Code 23233 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415707615155 Amount of Each Receipt this Period 1500.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Small Business Occupation SVP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C. Full Name (Last, First, Middle Initial) Eric Schweikert Mailing Address 2352 N Vernon St City Arlington State VA Zip Code 22207 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415720915155 Amount of Each Receipt this Period 504.00 P/R Deduction (\$42.00 Semi-Monthly)
Name of Employer SF-Strategic Finance Occupation Managing VP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

SUBTOTAL of Receipts This Page (optional)	3504.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Robert Bremer Mailing Address 6004 Glen Abbey Dr. City State Zip Code Glen Allen VA 23059 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415873815155 Amount of Each Receipt this Period 240.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Occupation Customer Mgmt IT VP, Information Technology Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

B. Full Name (Last, First, Middle Initial) James Mendelsohn Mailing Address 8021 Falstaff Rd City State Zip Code McLean VA 22102 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR416033815155 Amount of Each Receipt this Period 750.00 P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Occupation Market Intelligence VP, Strategy Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		

C. Full Name (Last, First, Middle Initial) Shawn Budde Mailing Address 2307 Monument Ave. City State Zip Code Richmond VA 23220 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR416043915155 Amount of Each Receipt this Period 2499.96 P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer Occupation ECM General Management SVP, Business Analysis Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2499.96		

SUBTOTAL of Receipts This Page (optional)	3489.96
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Richard Olson		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1608 Crestwood Lane		Transaction ID: PR416100815155	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period _____ 600.00		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$100.00 Semi-Monthly) _____		
Name of Employer Policy Affairs Occupation Director, Government Relations	Aggregate Year-to-Date ▼ _____ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Robert Bell		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2714 Kenwood Ave		Transaction ID: PR416107915155	
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period _____ 562.50		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$62.50 Semi-Monthly) _____		
Name of Employer Capital One Occupation Director, IT	Aggregate Year-to-Date ▼ _____ 562.50		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. David Wright		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2512 Maple Hall Court		Transaction ID: PR416109015155	
City State Zip Code Midlothian VA 23113	Amount of Each Receipt this Period _____ 420.00		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$71.66 Semi-Monthly) _____		
Name of Employer UK IT Planning Occupation Managing VP, IT	Aggregate Year-to-Date ▼ _____ 420.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1582.50
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Catherine West		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5782 Toad Hollow		Transaction ID: PR416109115155	
City State Zip Code The Colony TX 75056	Amount of Each Receipt this Period _____ 2499.96		
FEC ID number of contributing federal political committee. C			
Name of Employer Senior Management Occupation EVP President US Card	Aggregate Year-to-Date ▼ _____ 2499.96		P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Steven Pearlman		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3062 Que St NW		Transaction ID: PR416110215155	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period _____ 240.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One Occupation Associate General Counsel	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$20.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Scott Hildebrand		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3640 Worcester Lane		Transaction ID: PR416110315155	
City State Zip Code Keswick VA 22947	Amount of Each Receipt this Period _____ 2496.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One Occupation Managing VP, Brand Management	Aggregate Year-to-Date ▼ _____ 2496.00		P/R Deduction (\$208.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 5235.96
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Albert Hall		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4621-E Four Season Terr		Transaction ID: PR416110615155
City Glen Allen	State VA	Zip Code 23060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Capital One	Occupation Director, IT	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Larry Klane		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3018 O Street NW		Transaction ID: PR416110915155
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2499.96
Name of Employer Senior Management	Occupation President, Global Fin Services	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.96	

Full Name (Last, First, Middle Initial) C. Andres Navarrete		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5613 Wood Way		Transaction ID: PR416111015155
City Bethesda	State MD	Zip Code 20816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 682.00
Name of Employer Legal & Regulatory Advisory	Occupation Managing VP, Chief Counsel	P/R Deduction (\$68.20 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 682.00	

SUBTOTAL of Receipts This Page (optional)	3431.96
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Joan Schaffer		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6200 Robinwood Road		Transaction ID: PR41611115155
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Capital One	Occupation VP, Information Technology	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Leslie Yonce		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 307 Albemarle Avenue		Transaction ID: PR518032115155
City Richmond	State VA	Zip Code 23226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Capital One	Occupation Assistant General Counsel	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Laura Olle		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4200 Military Road NW		Transaction ID: PR591247315155
City Washington	State DC	Zip Code 20015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2499.96
Name of Employer Enterprise Risk Management	Occupation EVP, Enterprise Risk Management	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.96	

SUBTOTAL of Receipts This Page (optional)	3699.96
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

<p>A. Full Name (Last, First, Middle Initial) Douglas Krey</p> <p>Mailing Address 2032 Monument Ave</p> <p>City Richmond State VA Zip Code 23220</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Shared Services & Risk Mgmt Occupation SVP, Human Resources</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1500.00</p>	<p>Date of Receipt</p> <p><input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Transaction ID: PR591247415155</p> <p>Amount of Each Receipt this Period</p> <p style="text-align: right;">1500.00</p> <p>P/R Deduction (\$125.00 Semi-Monthly)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Jerry Miller</p> <p>Mailing Address 3020 Darnley Drive</p> <p>City Richmond State VA Zip Code 23235</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Sourcing, Contracting & Ins Occupation Sr. Manager, Procurement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 420.00</p>	<p>Date of Receipt</p> <p><input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Transaction ID: PR591247515155</p> <p>Amount of Each Receipt this Period</p> <p style="text-align: right;">420.00</p> <p>P/R Deduction (\$35.00 Semi-Monthly)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Anne Byrd</p> <p>Mailing Address 5806 Gate House Drive</p> <p>City Glen Allen State VA Zip Code 23059</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Specialty Operations Occupation Group Manager, Customer Svc</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt</p> <p><input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Transaction ID: PR591247615155</p> <p>Amount of Each Receipt this Period</p> <p style="text-align: right;">600.00</p> <p>P/R Deduction (\$50.00 Bi-Weekly)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>2520.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Terren Peterson		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3712 Sovereign Lane		Transaction ID: PR591247715155
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 504.00
Name of Employer Enter App Platforms	Occupation Director, Data Management	P/R Deduction (\$42.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

Full Name (Last, First, Middle Initial) B. Gregor Bailar		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6653 Sorrel St		Transaction ID: PR591247915155
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2499.96
Name of Employer Senior Management	Occupation Chief Information Officer	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.96	

Full Name (Last, First, Middle Initial) C. Robert Degenhardt		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 9207 Hartley Hill Ct		Transaction ID: PR593398415155
City Glen Allen	State VA	Zip Code 23060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer CMC - Channels and Fulfillment	Occupation Sr Manager, Process Management	P/R Deduction (\$29.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	3255.96
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 107
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Raymond Peloso Mailing Address 12305 Reed Forest Ct City State Zip Code Glen Allen VA 23059 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR613997015155 Amount of Each Receipt this Period 600.00 P/R Deduction (\$50.00 Semi-Monthly) 600.00
Name of Employer: Collections Baseline Strategy Occupation: VP, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		

B. Full Name (Last, First, Middle Initial) Franklin Thacker Mailing Address 306 Sunset Dr City State Zip Code Richmond VA 23229 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR624261815155 Amount of Each Receipt this Period 240.00 P/R Deduction (\$20.00 Semi-Monthly) 240.00
Name of Employer: Controller's Mgmt & Admin Occupation: SVP, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

C. Full Name (Last, First, Middle Initial) Carlos Palomares Mailing Address 102-25 Coral Creek Rd City State Zip Code Coral Gables FL 33156 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR682519615155 Amount of Each Receipt this Period 2499.96 P/R Deduction (\$208.33 Semi-Monthly) 2499.96
Name of Employer: GFS Management Occupation: SVP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2499.96		

SUBTOTAL of Receipts This Page (optional)	3339.96
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Patrick Gray		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR682519715155	
Mailing Address 2406 Brushcreek Drive		Amount of Each Receipt this Period 750.00	
City State Zip Code Keller TX 76248	FEC ID number of contributing federal political committee. C		
Name of Employer Occupation COAF - Fin & Acctg VP, Finance	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		
P/R Deduction (\$62.50 Semi-Monthly)			

B. Full Name (Last, First, Middle Initial) Kevin Murray		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR682519815155	
Mailing Address 6003 Woodley Rd.		Amount of Each Receipt this Period 600.00	
City State Zip Code McLean VA 22101	FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Regulatory Exams SVP, Business Analysis	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		
P/R Deduction (\$50.00 Semi-Monthly)			

C. Full Name (Last, First, Middle Initial) Ellen Falbo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR694166715155	
Mailing Address 3818 24th st. N		Amount of Each Receipt this Period 360.00	
City State Zip Code Arlington VA 22207	FEC ID number of contributing federal political committee. C		
Name of Employer Occupation CRM - Card VP, Business Analysis	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 360.00		
P/R Deduction (\$62.50 Semi-Monthly)			

SUBTOTAL of Receipts This Page (optional) ▶	1710.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Larry Rodriguez		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2600 Jim Johnson Rd.		Transaction ID: PR694166915155	
City Concord	State NC	Zip Code 28027	Amount of Each Receipt this Period 420.00
FEC ID number of contributing federal political committee. C			
Name of Employer Auto Finance - Sales Admin	Occupation Managing VP, Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		
		P/R Deduction (\$35.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Suzanne Murchland		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2750 Monacan Street # 304		Transaction ID: PR702722515155	
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period 240.00
FEC ID number of contributing federal political committee. C			
Name of Employer CRG - Restructuring	Occupation Community Relations Group Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		
		P/R Deduction (\$-20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Thomas Poole		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4503 Orr Drive		Transaction ID: PR740892815155	
City Chantilly	State VA	Zip Code 20151	Amount of Each Receipt this Period 372.00
FEC ID number of contributing federal political committee. C			
Name of Employer Up Market Account Mgmt	Occupation Managing VP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 372.00		
		P/R Deduction (\$31.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	1032.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Richard Walker		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 323 Clovelly Rd		Transaction ID: PR740892915155
City Richmond	State VA	Zip Code 23221
Amount of Each Receipt this Period _____ 900.00		P/R Deduction (\$75.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer Mainstreet Customer Management	Occupation VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00	

Full Name (Last, First, Middle Initial) B. Park Dodd		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address One Foxmere Dr.		Transaction ID: PR740893215155
City Richmond	State VA	Zip Code 23233
Amount of Each Receipt this Period _____ 218.75		P/R Deduction (\$31.25 Semi-Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer Capital One	Occupation Director, Finance & Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 218.75	

Full Name (Last, First, Middle Initial) C. Susan Tedesco		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 9000 River Trace Ct		Transaction ID: PR766884115155
City Richmond	State VA	Zip Code 23229
Amount of Each Receipt this Period _____ 240.00		P/R Deduction (\$20.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer SB Admin	Occupation VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 1358.75
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Paul Chemmanoor Mailing Address 4824 Saddleridge Court City State Zip Code Glen Allen VA 23059 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR852363815155 Amount of Each Receipt this Period 300.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Occupation ECM Internet IT Director, Master Appl Architect Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Kyle Shidler Mailing Address 6413 Rockbluff Cir. City State Zip Code Plano TX 75024 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR852363915155 Amount of Each Receipt this Period 1500.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Occupation Plano - Corporate SVP, Operations Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		

C. Full Name (Last, First, Middle Initial) Joseph Edson Mailing Address 14209 Fiddlers Ridge Rd City State Zip Code Midlothian VA 23112 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR852364215155 Amount of Each Receipt this Period 300.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Occupation Capital One Development Specialist Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. James Evans		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 105 N. Erlwood Court		Transaction ID: PR852364315155
City Richmond	State VA	Zip Code 23229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer Customer Care Admin	Occupation Managing VP, Operations	P/R Deduction (\$100.00 Se- mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Thomas Houston		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 171 N. Maple Ave		Transaction ID: PR861906215155
City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer US Card Chief Of Staff	Occupation Managing VP, Project Management	P/R Deduction (\$125.00 Se- mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Joseph Testa		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2205 Chestertown Dr		Transaction ID: PR907270015155
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Policy Affairs	Occupation Mgr St and Local Gov Relations	P/R Deduction (\$25.00 Sem- i-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Federico Genoese-Zerbi		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR907270215155
Mailing Address 5842 Saddle Downs PI		Amount of Each Receipt this Period 500.00
City State Zip Code Centreville VA 20120	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Capital One	Occupation Director, Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Karl Werwath		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR937267615155
Mailing Address 13007 River Road		Amount of Each Receipt this Period 499.92
City State Zip Code Richmond VA 23238	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Card Ops Admin	Occupation SVP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.92	

Full Name (Last, First, Middle Initial) C. Kenneth Peacock		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR937267715155
Mailing Address 15601 Chesdin Landing Terrace		Amount of Each Receipt this Period 1500.00
City State Zip Code Chesterfield VA 23838	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Infrastructure Management	Occupation VP Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2499.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Anil Chaturvedi		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 10805 Whiterim Dr		Transaction ID: PR937267815155
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Capital One	Occupation Director, Marketing	P/R Deduction (\$31.25 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. Marc T. Solomon		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2124 21st Road N		Transaction ID: PR939692515155
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer Upmarket Acquisition	Occupation VP, Business Analysis	P/R Deduction (\$62.50 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. John Polk		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 11709 Aprilbud Dr		Transaction ID: PR941791915155
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 504.00
Name of Employer CMC Ops Analysis and Proj Mgmt	Occupation Director, Operations Analysis	P/R Deduction (\$42.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

SUBTOTAL of Receipts This Page (optional)	2079.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Robert Armour Mailing Address 21 Brookside Farm Ln. City State Zip Code Sudbury MA 01776 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR945153115155 Amount of Each Receipt this Period 750.00 P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Occupation COHF IT VP, Information Technology Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		

B. Full Name (Last, First, Middle Initial) Samir Deshpande Mailing Address 10513 Tyler Terrace City State Zip Code Potomac MD 20854 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR945153215155 Amount of Each Receipt this Period 1500.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Occupation Dealer M&A SVP, Business Analysis Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		

C. Full Name (Last, First, Middle Initial) Frederick Knowles Mailing Address 6304 Avalon Dr City State Zip Code Bethesda MD 20816 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR945153515155 Amount of Each Receipt this Period 1500.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Occupation HR Planning SVP, HR Client Consulting Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional)	3750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 107
	<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)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial) Curtis Garrett Mailing Address 9311 Squirrel Tree Court City State Zip Code Chesterfield VA 23838 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR945153615155 Amount of Each Receipt this Period 375.00 P/R Deduction (\$31.25 Semi-Monthly)
Name of Employer Decision Management Occupation VP, Information Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B. Full Name (Last, First, Middle Initial) Peter Deoudes Mailing Address 300 Autumn Wind Way City State Zip Code Rockville MD 20850 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR947256415155 Amount of Each Receipt this Period 750.00 P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Regulatory Exams Occupation VP, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) Theresa Sapp Mailing Address 12705 Millledge City State Zip Code Richmond VA 23233 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR947256515155 Amount of Each Receipt this Period 625.00 P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Capital One Occupation Director, IT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Joseph Morgan		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR947256615155
Mailing Address 703 Big Woods Place		Amount of Each Receipt this Period 750.00
City State Zip Code Mankin Sabot VA 23103	FEC ID number of contributing federal political committee. C	P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Occupation Helix Operations VP, Information Technology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) B. Wylie Schwieder		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR949575615155
Mailing Address 5905 Brookmeade Terrace		Amount of Each Receipt this Period 1500.00
City State Zip Code Glen Allen VA 23059	FEC ID number of contributing federal political committee. C	P/R Deduction (\$0.00 Semi-Monthly)
Name of Employer Occupation Capital One SVP, Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. William Cilluffo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR952992915155
Mailing Address 155 Alexandra Blvd		Amount of Each Receipt this Period 1500.00
City State Zip Code Toronto ON M4R 1-M3	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Occupation Canada Senior Mgmt SVP, Business Analysis	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 / 107
	(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Howard Powlesson		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8206 Fair Isle Terrace		Transaction ID: PR952993015155
City State Zip Code Chesterfield VA 23838	Amount of Each Receipt this Period _____ 240.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$20.00 Semi-Monthly) _____
Name of Employer Capital One	Occupation Director, IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	

Full Name (Last, First, Middle Initial) B. Radhashyam Giridharadas		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5310 Dorset Ave		Transaction ID: PR956809015155
City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period _____ 1736.82	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$105.26 Semi-Monthly) _____
Name of Employer Capital One	Occupation VP, Marketing & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1736.82	

Full Name (Last, First, Middle Initial) C. Barry Beswick		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 557 Woodson Court		Transaction ID: PR956833115155
City State Zip Code Manakin-Sabot VA 23103	Amount of Each Receipt this Period _____ 750.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$62.50 Semi-Monthly) _____
Name of Employer WC - Banking	Occupation VP, Corporate Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	2726.82
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 70 / 107	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

A. Full Name (Last, First, Middle Initial)
Timothy McGough

Mailing Address 3510 Broadrun Dr

City State Zip Code
Fairfax VA 22033

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

Name of Employer Occupation
Client Support - Finance VP, HR Client Consulting

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y

Transaction ID: PR966702315155

Amount of Each Receipt this Period
900.00

P/R Deduction (\$40.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	289076.39

**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 71 / 107

<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. ABA BankPAC		Transaction ID: 10712808 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 5
Mailing Address 1120 Connecticut Ave. NW		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20036	011 Category/ Type	
Purpose of Disbursement		
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) ▼	

Full Name (Last, First, Middle Initial) B. Rodney Alexander For Congress Inc.		Transaction ID: 11074294 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 5
Mailing Address PO Box 367 319 Nancy Road		Amount of Each Disbursement this Period 1000.00
City Quitman State LA Zip Code 71268	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Rodney Alexander		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends Of George Allen		Transaction ID: 10712810 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 5
Mailing Address Post Office Box 87		Amount of Each Disbursement this Period 4500.00
City Alexandria State VA Zip Code 22313	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. George F. Allen		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10500.00
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 72 / 107

<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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. American Success PAC		Transaction ID: 11221250 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 5000.00
City	State Zip Code	
Purpose of Disbursement		<input type="text" value="011"/> Category/ Type
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Bachus For Congress		Transaction ID: 10917810 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 5
Mailing Address Po Box 59444		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement		<input type="text" value="011"/> Category/ Type
Candidate Name Rep. Spencer Bachus		
Office Sought:	Disbursement For:	
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AL	District: 6	

Full Name (Last, First, Middle Initial) C. Baker For Congress Committee		Transaction ID: 11232233 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 9132 Highland Garden Road		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement		<input type="text" value="011"/> Category/ Type
Candidate Name Rep. Richard H. Baker		
Office Sought:	Disbursement For:	
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA	District: 6	

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Congressman Joe Barton Comm.		Transaction ID: 11272929 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2005
Mailing Address 701 Williamsburg		Amount of Each Disbursement this Period 2500.00
City Ennis State TX Zip Code 75120	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Joe L. Barton		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 6	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bass Victory Committee		Transaction ID: 11074361 Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2005
Mailing Address PO Box 3451 PO Box 3451		Amount of Each Disbursement this Period 1000.00
City Concord State NH Zip Code 03302	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Charles F. Bass		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Melissa Bean For Congress		Transaction ID: 11260128 Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2005
Mailing Address 203 Frances Lane		Amount of Each Disbursement this Period 1000.00
City Barrington State IL Zip Code 60010	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Melissa Bean		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Bob Beauprez For Congress Committee		Transaction ID: 10834005 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 5
Mailing Address P.O. Box 501		Amount of Each Disbursement this Period 1000.00
City Wheatridge State CO Zip Code 80034	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Bob Beauprez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 7	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Boucher for Congress		Transaction ID: 10834000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 5
Mailing Address 188 East Main Street		Amount of Each Disbursement this Period 1000.00
City Abingdon State VA Zip Code 24210	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Rick Boucher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 9	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Michael Burgess For Congress		Transaction ID: 10763348 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 5
Mailing Address P.O. Box 2334		Amount of Each Disbursement this Period 1000.00
City Denton State TX Zip Code 76202	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Michael Burgess		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Friends Of Conrad Burns - 2006		Transaction ID: 10924073	
Mailing Address P O Box 1532		Date of Disbursement MM / DD / YYYY 04 / 13 / 2005	
City Billings	State MT	Zip Code 59103	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. Conrad Burns			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2006	
State: MT	District: 2		

Full Name (Last, First, Middle Initial) B. Richard Burr Committee, The		Transaction ID: 10769037	
Mailing Address Post Office Box 5928		Date of Disbursement MM / DD / YYYY 03 / 09 / 2005	
City Winston-Salem	State NC	Zip Code 27113	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Richard M. Burr			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	2004	
State: NC	District: 5	2004 General Debt Re	

Full Name (Last, First, Middle Initial) C. Richard Burr Committee, The		Transaction ID: 11223140	
Mailing Address Post Office Box 5928		Date of Disbursement MM / DD / YYYY 06 / 09 / 2005	
City Winston-Salem	State NC	Zip Code 27113	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Richard M. Burr			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2010	
State: NC	District: 5		

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Dan Burton For Congress Committee		Transaction ID: 10925034 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 5
Mailing Address P.O. Box 50593 P. O. Box 50593		Amount of Each Disbursement this Period 1000.00
City Indianapolis State IN Zip Code 46250	Purpose of Disbursement 011 Category/ Type	
Candidate Name Rep. Dan Burton		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 5		

Full Name (Last, First, Middle Initial) B. Cantor for Congress		Transaction ID: 10770024 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 5
Mailing Address P.O. Box 28280		Amount of Each Disbursement this Period 1000.00
City Richmond State VA Zip Code 23228	Purpose of Disbursement 011 Category/ Type	
Candidate Name Rep. Eric Cantor		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 7		

Full Name (Last, First, Middle Initial) C. CAPITO FOR CONGRESS		Transaction ID: 10712805 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 5
Mailing Address P.O. Box 11519		Amount of Each Disbursement this Period 1000.00
City Charleston State WV Zip Code 25339	Purpose of Disbursement 011 Category/ Type	
Candidate Name Rep. Shelley Moore Capito		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 2		

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Friends Of Lois Capps		Transaction ID: 10833972
Mailing Address PO Box 23940		Date of Disbursement MM / DD / YYYY 03 / 16 / 2005
City Santa Barbara	State CA	Zip Code 93121
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name Rep. Lois Capps	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 23		

Full Name (Last, First, Middle Initial) B. Capuano For Congress Committee		Transaction ID: 11261455
Mailing Address PO Box 440305		Date of Disbursement MM / DD / YYYY 06 / 23 / 2005
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00	
Candidate Name Rep. Michael E. Capuano	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA District: 8		

Full Name (Last, First, Middle Initial) C. Carper for Senate		Transaction ID: 10584040
Mailing Address Tatnall Bldg., William Penn St.		Date of Disbursement MM / DD / YYYY 01 / 26 / 2005
City Dover	State DE	Zip Code 19901
Purpose of Disbursement	Amount of Each Disbursement this Period 1450.00	
Candidate Name Sen. Tom Carper	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: DE District:		

SUBTOTAL of Disbursements This Page (optional)	3450.00
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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Carper for Senate		Transaction ID: 10917822	
Mailing Address Tatnall Bldg., William Penn St.		Date of Disbursement 04 / 13 / 2005	
City Dover	State DE	Zip Code 19901	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		011	Category/Type
Candidate Name Sen. Tom Carper			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: DE	District:		

Full Name (Last, First, Middle Initial) B. Castle Campaign Fund		Transaction ID: 11104351	
Mailing Address P.O. Box 133		Date of Disbursement 05 / 12 / 2005	
City Wilmington	State DE	Zip Code 19899	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011	Category/Type
Candidate Name Rep. Michael N. Castle			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: DE	District: 1		

Full Name (Last, First, Middle Initial) C. Coburn For Senate Committee		Transaction ID: 10770050	
Mailing Address 3300 W Okmulgee PO Box 977		Date of Disbursement 03 / 10 / 2005	
City Muskogee	State OK	Zip Code 74401	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011	Category/Type
Candidate Name Mr. Thomas Coburn			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2004 General Debt Re		
State: OK	District: 2		

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Coleman For Senate 08		Transaction ID: 11222942 Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2005
Mailing Address 570 Asbury Street Suite 201a		Amount of Each Disbursement this Period 1000.00
City St Paul Mn State MN Zip Code 55104	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Norm Coleman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends Of Kent Conrad		Transaction ID: 10763355 Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2005
Mailing Address PO Box 812		Amount of Each Disbursement this Period 1000.00
City Bismarck State ND Zip Code 58502	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Kent Conrad		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Crowley for Congress		Transaction ID: 10790167 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2005
Mailing Address P.O. Box 75214		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20013	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Joseph Crowley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 7	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Davis For Congress/Friends Of Danny K Davis		Transaction ID: 10789154 Date of Disbursement
Mailing Address 5956 W Race Avenue		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>
City Chicago	State IL	Zip Code 60644
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1500.00"/>
Candidate Name Rep. Danny K. Davis		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 7	

Full Name (Last, First, Middle Initial) B. TOM DAVIS FOR CONGRESS		Transaction ID: 10769824 Date of Disbursement
Mailing Address 3304 JUNIPER WAY		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>
City FALLS CHURCH	State VA	Zip Code 22044
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Rep. Thomas M. Davis, III		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 11	

Full Name (Last, First, Middle Initial) C. TOM DAVIS FOR CONGRESS		Transaction ID: 11272896 Date of Disbursement
Mailing Address 3304 JUNIPER WAY		<input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/>
City FALLS CHURCH	State VA	Zip Code 22044
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="2000.00"/>
Candidate Name Rep. Thomas M. Davis, III		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 11	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Tom Delay Congressional Committee		Transaction ID: 11232241 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 10707 Corporate Drive Suite 130		Amount of Each Disbursement this Period 5000.00
City Stafford State TX Zip Code 77477	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Thomas Delay		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Democratic Senatorial Campaign Committee		Transaction ID: 10970381 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 5
Mailing Address 120 Maryland Avenue, NE		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement		
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) ▼	

Full Name (Last, First, Middle Initial) C. Lincoln Diaz-Balart For Congress Committee		Transaction ID: 10970384 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 5
Mailing Address 2801 Ponce De Leon Blvd. Ste 1000		Amount of Each Disbursement this Period 2000.00
City Coral Gables State FL Zip Code 33134	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Lincoln Diaz-Balart		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 21	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	22000.00
TOTAL 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 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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Direct Voice, The PAC of the DMA		Transaction ID: 10970378 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 5
Mailing Address 1111 19th Street, NW Suite 1100		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20036		
Purpose of Disbursement	011 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) ▼	

Full Name (Last, First, Middle Initial) B. Thelma Drake For Congress		Transaction ID: 10834017 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 5
Mailing Address PO Box 61480		Amount of Each Disbursement this Period 1000.00
City Virginia Beach State VA Zip Code 23466		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Ms. Thelma Drake		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dreier For Congress Committee		Transaction ID: 10712806 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 5
Mailing Address P O Box 1110		Amount of Each Disbursement this Period 1000.00
City Covina State CA Zip Code 91722		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. David Dreier		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 28	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Ensign For Senate		Transaction ID: 10712804	
Mailing Address 8917 Stafford Springs Drive		Date of Disbursement MM / DD / YYYY 02 / 16 / 2005	
City Las Vegas	State NV	Zip Code 89134	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. John E. Ensign			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV	District: 2		

Full Name (Last, First, Middle Initial) B. Ensign For Senate		Transaction ID: 11222556	
Mailing Address 8917 Stafford Springs Drive		Date of Disbursement MM / DD / YYYY 06 / 08 / 2005	
City Las Vegas	State NV	Zip Code 89134	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. John E. Ensign			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV	District: 2		

Full Name (Last, First, Middle Initial) C. Ensign For Senate		Transaction ID: 11270154	
Mailing Address 8917 Stafford Springs Drive		Date of Disbursement MM / DD / YYYY 06 / 08 / 2005	
City Las Vegas	State NV	Zip Code 89134	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. John E. Ensign			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV	District: 2		

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. ERICPAC		Transaction ID: 10768919 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 5
Mailing Address 209 Pennsylvania Avenue, SE		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003		
Purpose of Disbursement	011 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) ▼	

Full Name (Last, First, Middle Initial) B. Anna Eshoo For Congress		Transaction ID: 11272783 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Anna G. Eshoo		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tom Feeney For Congress		Transaction ID: 10635848 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 5
Mailing Address 1420 Alafaya Trail #103		Amount of Each Disbursement this Period 1000.00
City Oviedo State FL Zip Code 32765		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Tom Feeney		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL 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

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(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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Financial Services Roundtable PAC		Transaction ID: 10970377 Date of Disbursement
Mailing Address 805 Fifteenth Street, NW Suite 600		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="011"/> Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

Full Name (Last, First, Middle Initial) B. First State PAC		Transaction ID: 11161717 Date of Disbursement
Mailing Address 426 C Street, NE		<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
City Washington	State DC	Zip Code 20002
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="011"/> Category/ Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

Full Name (Last, First, Middle Initial) C. Fitzpatrick For Congress		Transaction ID: 11161746 Date of Disbursement
Mailing Address 115 North Broad Street		<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
City Doylestown	State PA	Zip Code 18901
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name Mr. Michael Fitzpatrick		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="011"/> Category/ Type
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 8	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Committee To Re-Elect Vito Fossella		Transaction ID: 11276055 Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2005
Mailing Address PO Box 131403		Amount of Each Disbursement this Period 1000.00
City Staten Island State NY Zip Code 10313	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Vito J. Fossella		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Barney Frank For Congress Committee		Transaction ID: 10833966 Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2005
Mailing Address P O Box 260		Amount of Each Disbursement this Period 1000.00
City Newtonville State MA Zip Code 02460	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Barney Frank		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 4	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Good Government for America		Transaction ID: 10712811 Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2005
Mailing Address P.O. Box 87		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22313	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Al Green For Congress		Transaction ID: 11074364
Mailing Address 3003 South Loop West Suite 321		Date of Disbursement MM / DD / YYYY 05 / 03 / 2005
City Houston	State TX	Zip Code 77054
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Al Green		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 9	

Full Name (Last, First, Middle Initial) B. Al Green For Congress		Transaction ID: 11104171
Mailing Address 3003 South Loop West Suite 321		Date of Disbursement MM / DD / YYYY 05 / 11 / 2005
City Houston	State TX	Zip Code 77054
Purpose of Disbursement		Amount of Each Disbursement this Period 1500.00
Candidate Name Rep. Al Green		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 9	

Full Name (Last, First, Middle Initial) C. Gutknecht For U S Congress Committee		Transaction ID: 11073121
Mailing Address PO Box 6428		Date of Disbursement MM / DD / YYYY 05 / 03 / 2005
City Rochester	State MN	Zip Code 55903
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Gil Gutknecht		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 1	

SUBTOTAL of Disbursements This Page (optional)	3500.00
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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Hagel For Senate		Transaction ID: 10768488 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 5
Mailing Address P.O. Box 241497		Amount of Each Disbursement this Period 1500.00
City Omaha State NE Zip Code 68124		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Chuck Hagel		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hatch Election Committee Inc		Transaction ID: 10970376 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 5
Mailing Address 175 South West Temple Suite 650		Amount of Each Disbursement this Period 1000.00
City Salt Lake City State UT Zip Code 84101		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Sen. Orrin Hatch		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Herseth For Congress		Transaction ID: 11161712 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 5
Mailing Address P.O. Box 884		Amount of Each Disbursement this Period 1000.00
City Brookings State SD Zip Code 57006		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Stephanie Herseth		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 0	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Hooley For Congress		Transaction ID: 11161725 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 5
Mailing Address PO Box 2050		Amount of Each Disbursement this Period 1000.00
City Salem State OR Zip Code 97308	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Darlene Hooley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hoyer For Congress		Transaction ID: 11237759 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 5
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 1000.00
City Clinton State MD Zip Code 20735	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Steny H. Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Steve Israel For Congress Committee		Transaction ID: 10790166 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 5
Mailing Address PO Box 777		Amount of Each Disbursement this Period 1000.00
City Deer Park State NY Zip Code 11729	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Steve Israel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Tim Johnson For South Dakota Inc		Transaction ID: 11072628 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 5
Mailing Address PO Box 1859		Amount of Each Disbursement this Period 5000.00
City Sioux Falls	State SD	
Zip Code 57101		011 Category/ Type
Purpose of Disbursement		
Candidate Name Sen. Tim Johnson		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 2	

Full Name (Last, First, Middle Initial) B. Tim Johnson For South Dakota Inc		Transaction ID: 11072722 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 5
Mailing Address PO Box 1859		Amount of Each Disbursement this Period 5000.00
City Sioux Falls	State SD	
Zip Code 57101		011 Category/ Type
Purpose of Disbursement		
Candidate Name Sen. Tim Johnson		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 2	

Full Name (Last, First, Middle Initial) C. Sue Kelly For Congress		Transaction ID: 10726871 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 5
Mailing Address 187 Jay Street		Amount of Each Disbursement this Period 500.00
City Katonah	State NY	
Zip Code 10536		011 Category/ Type
Purpose of Disbursement		
Candidate Name Rep. Sue W. Kelly		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 19	

SUBTOTAL of Disbursements This Page (optional) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Sue Kelly For Congress		Transaction ID: 11221392 Date of Disbursement 06 / 07 / 2005
Mailing Address 187 Jay Street		Amount of Each Disbursement this Period 1000.00
City Katonah	State NY	
Zip Code 10536		
Purpose of Disbursement		
Candidate Name Rep. Sue W. Kelly		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 19		

Full Name (Last, First, Middle Initial) B. Mark Kennedy 06		Transaction ID: 10584039 Date of Disbursement 01 / 26 / 2005
Mailing Address PO Box 49333		Amount of Each Disbursement this Period 1000.00
City Blaine	State MN	
Zip Code 55449		
Purpose of Disbursement		
Candidate Name Rep. Mark Kennedy		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 6		

Full Name (Last, First, Middle Initial) C. Kyl for Senate		Transaction ID: 10924075 Date of Disbursement 04 / 13 / 2005
Mailing Address 2200 East Camelback Road Suite 120		Amount of Each Disbursement this Period 1000.00
City Phoenix	State AZ	
Zip Code 85016-8301		
Purpose of Disbursement		
Candidate Name Sen. Jon Kyl		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 2		

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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Kyl for Senate		Transaction ID: 11255546 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 5
Mailing Address 2200 East Camelback Road Suite 120		Amount of Each Disbursement this Period 1000.00
City Phoenix State AZ Zip Code 85016-8301		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Sen. Jon Kyl		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lucas For Congress		Transaction ID: 10712807 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 5
Mailing Address Post Office Box 1726		Amount of Each Disbursement this Period 1000.00
City Oklahoma City State OK Zip Code 73101		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Frank D. Lucas		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Lucas For Congress		Transaction ID: 11261556 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 5
Mailing Address Post Office Box 1726		Amount of Each Disbursement this Period 1000.00
City Oklahoma City State OK Zip Code 73101		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Frank D. Lucas		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Maloney For Congress		Transaction ID: 11260131 Date of Disbursement
Mailing Address 49 East 92nd Street		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>
City New York	State NY	Zip Code 10128
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Rep. Carolyn B. Maloney		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 14		

Full Name (Last, First, Middle Initial) B. Kenny Marchant For Congress		Transaction ID: 10902141 Date of Disbursement
Mailing Address PO Box 110187		<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2005"/>
City Carrollton	State TX	Zip Code 75011
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Mr. Kenny Marchant		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 24		

Full Name (Last, First, Middle Initial) C. Matheson For Congress		Transaction ID: 10833991 Date of Disbursement
Mailing Address 677 South 200 West Suite A		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2005"/>
City Salt Lake City	State UT	Zip Code 84101
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Rep. James D. Matheson		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: UT District: 2		

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)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Matheson For Congress		Transaction ID: 11260136 Date of Disbursement
Mailing Address 677 South 200 West Suite A		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
City Salt Lake City	State UT	Zip Code 84101
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name Rep. James D. Matheson		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/Type
State: UT	District: 2	

Full Name (Last, First, Middle Initial) B. Friends Of Carolyn Mccarthy		Transaction ID: 11221641 Date of Disbursement
Mailing Address 151 Linden Road		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>
City Mineola	State NY	Zip Code 11501
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name Rep. Carolyn McCarthy		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/Type
State: NY	District: 4	

Full Name (Last, First, Middle Initial) C. Mcconnell Senate Committee '08		Transaction ID: 10769886 Date of Disbursement
Mailing Address PO Box 1496		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2005"/>
City Louisville	State KY	Zip Code 40201
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name Sen. Mitch McConnell		<input type="text" value="2500.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/Type
State: KY	District: 2	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
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)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Mchenry For Congress		Transaction ID: 10712132 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 5
Mailing Address PO Box 360		Amount of Each Disbursement this Period 1000.00
City Cherryville State NC Zip Code 28021	Purpose of Disbursement 011 Category/Type	
Candidate Name Patrick McHenry	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mchenry For Congress		Transaction ID: 11098910 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 5
Mailing Address PO Box 360		Amount of Each Disbursement this Period 1000.00
City Cherryville State NC Zip Code 28021	Purpose of Disbursement 011 Category/Type	
Candidate Name Patrick McHenry	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Committee To Elect Mchugh		Transaction ID: 10726873 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 5
Mailing Address 228 S. Washington St.		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. John M. McHugh	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Committee To Elect Mchugh		Transaction ID: 11261555 Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2005
Mailing Address 228 S. Washington St.		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. John M. McHugh		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Candice Miller For Congress		Transaction ID: 10789152 Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2005
Mailing Address P.O. Box 182152		Amount of Each Disbursement this Period 1000.00
City Shelby Township State MI Zip Code 48318	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Candice Miller		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. National Republican Congressional Committee		Transaction ID: 10635842 Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2005
Mailing Address 320 First Street		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	17000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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Detailed Summary Page

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. National Republican Senatorial Committee		Transaction ID: 10558116 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 5
Mailing Address 425 2nd Street, NE		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement		
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) ▼	

Full Name (Last, First, Middle Initial) B. Nelson For U S Senate		Transaction ID: 11161733 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 5
Mailing Address PO Box 540154		Amount of Each Disbursement this Period 1000.00
City Omaha State NE Zip Code 68154	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Ben Nelson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Bob Ney For Congress		Transaction ID: 10902140 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5
Mailing Address PO Box 490		Amount of Each Disbursement this Period 1000.00
City St Clairsville State OH Zip Code 43950	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Robert W. Ney		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	17000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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Detailed Summary Page

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Norwood For Congress		Transaction ID: 10726866 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 5
Mailing Address PO Box 499		Amount of Each Disbursement this Period 1000.00
City Evans State GA Zip Code 30809		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Charles Norwood		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 9	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nussle For Congress Committee		Transaction ID: 10790169 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 5
Mailing Address P.O. Box 324		Amount of Each Disbursement this Period 1000.00
City Manchester State IA Zip Code 52057		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Jim Nussle		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PETEPAC		Transaction ID: 11162673 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 5
Mailing Address 3686 King Street, #146		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22302		
Purpose of Disbursement	011 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Porter For Congress		Transaction ID: 11104270 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 5
Mailing Address PO Box 26087		Amount of Each Disbursement this Period 1000.00
City Las Vegas	State NV	
Zip Code 89126		
Purpose of Disbursement		
Candidate Name Mr. Jon Porter		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District: 3		

Full Name (Last, First, Middle Initial) B. Price For Congress		Transaction ID: 10769256 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 5
Mailing Address PO Box 425		Amount of Each Disbursement this Period 2000.00
City Roswell	State GA	
Zip Code 30077		
Purpose of Disbursement		
Candidate Name Mr. Thomas Price		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 6		

Full Name (Last, First, Middle Initial) C. Mark Pryor For Us Senate		Transaction ID: 10635849 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 5
Mailing Address PO Box 2720		Amount of Each Disbursement this Period 1500.00
City Little Rock	State AR	
Zip Code 72203		
Purpose of Disbursement		
Candidate Name Mr. Mark Pryor		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AR District: 2		

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

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

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

FOR LINE NUMBER:
(check only one)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Rely On Your Beliefs Fund		Transaction ID: 10763368 Date of Disbursement
Mailing Address 209 Pennsylvania Avenue, SE		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2005"/>
City Washington	State DC	Zip Code 20003
Purpose of Disbursement	<input type="text" value="011"/> 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:		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) B. Rick Renzi For Congress		Transaction ID: 10712809 Date of Disbursement
Mailing Address P.O. Box 219		<input type="text" value="02"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
City Flagstaff	State AZ	Zip Code 86002
Purpose of Disbursement	<input type="text" value="011"/> Category/Type	
Candidate Name Rep. Rick Renzi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 1		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) C. ROGERS FOR CONGRESS		Transaction ID: 10635846 Date of Disbursement
Mailing Address P.O. Box 581		<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>
City Brighton	State MI	Zip Code 48116
Purpose of Disbursement	<input type="text" value="011"/> Category/Type	
Candidate Name Rep. Mike Rogers		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 8		

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
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)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Schiff For Congress		Transaction ID: 10789151 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 5
Mailing Address 725 S. Figueroa St. Ste. 3200		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90017		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Adam B. Schiff Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 29		

Full Name (Last, First, Middle Initial) B. David Scott For Congress		Transaction ID: 10858238 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 5
Mailing Address 162 Hurt Street Ne		Amount of Each Disbursement this Period 1500.00
City Atlanta State GA Zip Code 30307		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. David Scott Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 13		

Full Name (Last, First, Middle Initial) C. Searchlight Leadership Fund		Transaction ID: 10790162 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 5
Mailing Address 422 C Street, NE Lower Level		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement	011 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) ▶	3500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Searchlight Leadership Fund		Transaction ID: 11256339 Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2005
Mailing Address 422 C Street, NE Lower Level		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement 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:		

Full Name (Last, First, Middle Initial) B. Pete Sessions For Congress 2006		Transaction ID: 11074035 Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2005
Mailing Address P.O. Box 38585		Amount of Each Disbursement this Period 2500.00
City Dallas State TX Zip Code 75238	011 Category/ Type	
Purpose of Disbursement Candidate Name Rep. Pete Sessions		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 32		

Full Name (Last, First, Middle Initial) C. John Shadegg For Congress		Transaction ID: 10833994 Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2005
Mailing Address P.O. Box 45444		Amount of Each Disbursement this Period 1000.00
City Phoenix State AZ Zip Code 85064	011 Category/ Type	
Purpose of Disbursement Candidate Name Rep. John B. Shadegg		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District: 3		

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

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

Use separate schedule(s)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. John Shadegg For Congress		Transaction ID: 11272765 Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2005
Mailing Address P.O. Box 45444		Amount of Each Disbursement this Period 1000.00
City Phoenix State AZ Zip Code 85064	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. John B. Shadegg		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Christopher Shays For Congress Committee		Transaction ID: 11276049 Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2005
Mailing Address 98 East Avenue Rear Building 98 East Avenue Rear Building		Amount of Each Disbursement this Period 1000.00
City Norwalk State CT Zip Code 06851	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Christopher Shays		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 4	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends Of Mike Sodrel		Transaction ID: 10711161 Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2005
Mailing Address 702 North Shore Drive Suite 500		Amount of Each Disbursement this Period 1000.00
City Jeffersonville State IN Zip Code 47130	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. Michael Sodrel		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 9	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**SCHEDULE B (FEC Form 3X)
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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Friends Of Cliff Stearns		Transaction ID: 11074366 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 5
Mailing Address PO Box 308		Amount of Each Disbursement this Period 1000.00
City Silver Springs	State FL	
Zip Code 34489		
Purpose of Disbursement		
Candidate Name Rep. Cliff Stearns		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 6		

Full Name (Last, First, Middle Initial) B. Stevens For Senate Committee		Transaction ID: 11074369 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 5
Mailing Address PO Box 100879		Amount of Each Disbursement this Period 2000.00
City Anchorage	State AK	
Zip Code 99510		
Purpose of Disbursement		
Candidate Name Sen. Ted Stevens		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AK District: 1		

Full Name (Last, First, Middle Initial) C. Talent For Senate Committee		Transaction ID: 10924076 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 5
Mailing Address 147 N Meramec Suite 100		Amount of Each Disbursement this Period 2000.00
City St Louis	State MO	
Zip Code 63105		
Purpose of Disbursement		
Candidate Name Mr. James Talent		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO District: 2		

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)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. Tiberi For Congress		Transaction ID: 10902139 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5
Mailing Address 2021 East Dublin Granville Road Suite 2000		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43229	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Patrick J. Tiberi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Turner For Congress		Transaction ID: 10712803 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 5
Mailing Address 131 N. Ludlow Street Suite 317		Amount of Each Disbursement this Period 1000.00
City Dayton State OH Zip Code 45402	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Michael R. (Mike) Turner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee To Re-Elect Nydia M. Velazquez To Congre		Transaction ID: 10769949 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 5
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1000.00
City Gaithersburg State MD Zip Code 20878	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Nydia M. Velazquez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial) A. VOLPAC		Transaction ID: 10924072 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 158552		Amount of Each Disbursement this Period 5000.00
City Nashville State TN Zip Code 37215	011 Category/ Type	
Purpose of Disbursement		
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) ▼	

Full Name (Last, First, Middle Initial) B. Schultz Debbie Wasserman		Transaction ID: 11260129 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 5
Mailing Address 4479 Foxglove Ln		Amount of Each Disbursement this Period 1000.00
City Weston State FL Zip Code 33331	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Debbie Wasserman-Schultz		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Whitfield For Congress Committee		Transaction ID: 11260133 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 5
Mailing Address P.O. Box 391		Amount of Each Disbursement this Period 1000.00
City Hopkinsville State KY Zip Code 42241	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Ed Whitfield		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	209950.00

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)

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<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)

Capital One Financial Corp. Assoc. Political Fund

Full Name (Last, First, Middle Initial)

A. Ray Nagin Campaign Fund

Mailing Address 1615 Poydras
Suite 660

City State Zip Code
New Orleans LA 70112

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 11071373

Date of Disbursement

05 / 03 / 2005

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00