

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
Constitution Party National Committee

ADDRESS (number and street) 408 W. Chestnut Street
P.O. Box 1782
 Check if different than previously reported. (ACC)
Lancaster PA 17608-1782

2. **FEC IDENTIFICATION NUMBER** C00279802
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 10 01 2009 through 10 31 2009

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 Joe Sanger

Signature of Treasurer Electronically Filed by Joe Sanger Date 11 19 2009

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

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

A. Form/Schedule : **F3XN**

Transaction ID :

All administrative expenses made for purposes of operating a political committee including, but not limited to, rent, utilities, salaries, telephone service, office equipment, and supplies are accurately reported. Any coordinated, independent and in-kind expenditures made this reporting period are included in this report. Best Efforts have been used to obtain occupation and employer information. Original solicitations include a clear and conspicuous request for the contributor information and do inform the contributor of the requirements of federal law for the reporting of such information. If the information is not provided a stand-alone follow-up request is made for the information.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Constitution Party National Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		5228.18
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	8002.76									
(c) Total Receipts (from Line 19)	39696.00	242606.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	47698.76	247834.89								
7. Total Disbursements (from Line 31)	36939.76	237075.89								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10759.00	10759.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	1204.30									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	30223.68									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Constitution Party National Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	29857.00	105714.65
(ii) Unitemized	9739.00	135617.89
(iii) TOTAL (add Lines 11(a)(i) and (ii)	39596.00	241332.54
(b) Political Party Committees	0.00	1150.00
(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)	39596.00	242482.54
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)	100.00	124.17
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))	39696.00	242606.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	39696.00	242606.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	36904.76	233235.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	36904.76	233235.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	35.00	2690.00
(b) Political Party Committees	0.00	1150.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	35.00	3840.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	36939.76	237075.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36939.76	237075.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	39596.00	242482.54
34. Total Contribution Refunds (from Line 28(d))	35.00	3840.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39561.00	238642.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	36904.76	233235.89
37. Offsets to Operating Expenditures (from Line 15, page 3)	100.00	124.17
38. Net Operating Expenditures (subtract Line 37 from Line 36)	36804.76	233111.72

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City State Zip Code
none 12345

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-329.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58901

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City State Zip Code
none 12345

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-308.00

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

Transaction ID: SA11AI.59045

Amount of Each Receipt this Period
21.00

C.

Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City State Zip Code
none 12345

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-208.00

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

Transaction ID: SA11AI.59079

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **221.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City State Zip Code
none 12345

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-122.00

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

Transaction ID: SA11AI.59107

Amount of Each Receipt this Period
86.00

B.

Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City State Zip Code
none 12345

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-82.00

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

Transaction ID: SA11AI.59108

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City State Zip Code
none 12345

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-22.00

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

Transaction ID: SA11AI.59109

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **186.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 86
	<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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
donald arrowsmith

Mailing Address 784 W 2550 N

City Clinton State UT Zip Code 84015

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

Name of Employer davis transportation Occupation bus driver

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: SA11AI.58692
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Mr Carl Bachle

Mailing Address 3791 Maidstone Road

City Jackson State MI Zip Code 49202-1176

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

Name of Employer none Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 14 / 2009
Transaction ID: SA11AI.58888
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Chuck Baldwin

Mailing Address 7970 Sasser Lane

City Pensacola State FL Zip Code 32526

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

Name of Employer Self Employed Occupation Pastor/Columnist/Radio Broadcaster

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: SA11AI.59038
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► 575.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 86

(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)
Constitution Party National Committee

A.

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

Mailing Address 6839 Boeing Ave.

City State Zip Code
Fontana CA 92336

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

Name of Employer Occupation
Chelene Nightingale Volunteer Coordinator

Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
280.00

Date of Receipt

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

Transaction ID: SA11AI.58816

Amount of Each Receipt this Period
245.00

B.

Full Name (Last, First, Middle Initial)
Jann Bass

Mailing Address P.O. Box 307

City State Zip Code
Manakin Sabot VA 23103

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

Name of Employer Occupation
Student none

Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58927

Amount of Each Receipt this Period
195.00

C.

Full Name (Last, First, Middle Initial)
Dave Batcheller

Mailing Address 6801 Los Volcanes Rd NW Apt A18

City State Zip Code
Albuquerque NM 87121-8437

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

Name of Employer Occupation
The Bell Group/Rio Grande Accounts Payable

Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.58973

Amount of Each Receipt this Period
390.00

SUBTOTAL of Receipts This Page (optional)

830.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Dave Batcheller

Mailing Address 6801 Los Volcanes Rd NW Apt A18

City Albuquerque State NM Zip Code 87121-8437

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

Name of Employer The Bell Group/Rio Grande Occupation Accounts Payable

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.59052

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Barbara A. Benton

Mailing Address 1175 W 5000 S., Apt. A

City Salt Lake City State UT Zip Code 84123

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

Name of Employer Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2009

Transaction ID: SA11AI.59128

Amount of Each Receipt this Period 30.00

C.

Full Name (Last, First, Middle Initial)
Mr. C. George Boulanger

Mailing Address 600 Iris St

City Tularosa State NM Zip Code 88352-2507

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

Name of Employer Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 01 / 2009

Transaction ID: SA11AI.58683

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 86
(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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Mr. C. George Boulanger

Mailing Address 600 Iris St

City Tularosa State NM Zip Code 88352-2507

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

Name of Employer Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 15 / 2009

Transaction ID: SA11AI.58946

Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Dr. Claud A. Boyd

Mailing Address 1863 Lodgepole Ave

City North Augusta State SC Zip Code 29841-2128

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

Name of Employer self Occupation physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.59101

Amount of Each Receipt this Period 5.00

C. Full Name (Last, First, Middle Initial)
Christopher Boyette

Mailing Address 106 Lake Erie St Apt C

City Middletown State RI Zip Code 02842-4772

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

Name of Employer US Navy Occupation Chief Petty Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 01 / 2009

Transaction ID: SA11AI.58679

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 86
	(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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Scott N Bradley	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 1496 East 2700 North	Transaction ID: SA11AI.58936
	City Logan State UT Zip Code 84341	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation author, lecturer, consultant Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00

B.	Full Name (Last, First, Middle Initial) Erica Briggs	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address PO Box 171	Transaction ID: SA11AI.59061
	City Northville State MI Zip Code 48167	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Carrier, Blackman & Assoc Occupation Intellectual Property Exp. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

C.	Full Name (Last, First, Middle Initial) Ron Burrow	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 1823 Hollow Wind Dr.	Transaction ID: SA11AI.58656
	City Katy State TX Zip Code 77450	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GAS Unlimited Occupation Piping Designer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	525.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Dorothy Q. Bursey		Date of Receipt
	Mailing Address 3067 Bourbon St		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Sanford	NC	27332-7337
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59133
Name of Employer retired		Occupation	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="235.00"/>	

B.	Full Name (Last, First, Middle Initial) Dr. Curtis Caine		Date of Receipt
	Mailing Address 712 Forest Point Dr		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brandon	MS	39047-6220
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59035
Name of Employer self		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="625.00"/>	

C.	Full Name (Last, First, Middle Initial) Dr. Curtis Caine		Date of Receipt
	Mailing Address 712 Forest Point Dr		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brandon	MS	39047-6220
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59051
Name of Employer self		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="195.00"/>
		<input type="text" value="820.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="270.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Dr. Curtis Caine

Mailing Address 712 Forest Point Dr

City State Zip Code
Brandon MS 39047-6220

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

Name of Employer self Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1820.00

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

Transaction ID: SA11AI.59071

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Darrell L. Castle

Mailing Address 2586 Hocksett Cove

City State Zip Code
Germantown TN 38139

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

Name of Employer Darrell Castle and Associates Occupation attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1620.00

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

Transaction ID: SA11AI.58736

Amount of Each Receipt this Period
195.00

C.

Full Name (Last, First, Middle Initial)
Darrell L. Castle

Mailing Address 2586 Hocksett Cove

City State Zip Code
Germantown TN 38139

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

Name of Employer Darrell Castle and Associates Occupation attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1745.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58940

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **1320.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Arthur M. Clark	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 1920 Little Walnut Rd # A	Transaction ID: SA11AI.58671
	City State Zip Code Silver City NM 88061-6207	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 745.00

B.	Full Name (Last, First, Middle Initial) James N. Clymer	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 301 Letort Rd	Transaction ID: SA11AI.58966
	City State Zip Code Millersville PA 17551-9655	Amount of Each Receipt this Period 6000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Clymer & Musser Occupation attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15320.00

C.	Full Name (Last, First, Middle Initial) James N. Clymer	Date of Receipt MM / DD / YYYY 10 / 22 / 2009
	Mailing Address 301 Letort Rd	Transaction ID: SA11AI.59008
	City State Zip Code Millersville PA 17551-9655	Amount of Each Receipt this Period 1125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Clymer & Musser Occupation attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16445.00

SUBTOTAL of Receipts This Page (optional)	7200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Joe Coffey

Mailing Address 1756 Fort Henry Dr

City Kingsport State TN Zip Code 37664-3227

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

Name of Employer Self Occupation Business Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1394.50

Date of Receipt 10 / 02 / 2009

Transaction ID: SA11AI.58738

Amount of Each Receipt this Period 585.00

B.

Full Name (Last, First, Middle Initial)
Joe Coffey

Mailing Address 1756 Fort Henry Dr

City Kingsport State TN Zip Code 37664-3227

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

Name of Employer Self Occupation Business Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1594.50

Date of Receipt 10 / 02 / 2009

Transaction ID: SA11AI.58739

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Nathaniel Coffey

Mailing Address 156 Maden Dr.

City Johnson City State TN Zip Code 37615

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

Name of Employer none Occupation student

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.59072

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1285.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 86
	<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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Nathaniel Coffey

Mailing Address 156 Maden Dr.

City Johnson City State TN Zip Code 37615

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

Name of Employer none Occupation student

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

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

Transaction ID: SA11AI.59088

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Tim Coleman

Mailing Address 2522 N 35th Ave

City Phoenix State AZ Zip Code 85009-1314

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

Name of Employer Hyles 35th Ave Baptist Church Occupation Pastor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.58937

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Tim Coleman

Mailing Address 2522 N 35th Ave

City Phoenix State AZ Zip Code 85009-1314

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

Name of Employer Hyles 35th Ave Baptist Church Occupation Pastor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

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

Transaction ID: SA11AI.59081

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **260.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 86
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Allen Cornell

Mailing Address PO Box 312333

City State Zip Code
New Braunfels TX 78131-2333

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

Name of Employer self Occupation
self CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1085.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58759

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Allen Cornell

Mailing Address PO Box 312333

City State Zip Code
New Braunfels TX 78131-2333

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

Name of Employer self Occupation
self CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1185.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59062

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Allen Cornell

Mailing Address PO Box 312333

City State Zip Code
New Braunfels TX 78131-2333

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

Name of Employer self Occupation
self CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1190.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59066

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **205.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Allen Cornell

Mailing Address PO Box 312333

City State Zip Code
New Braunfels TX 78131-2333

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

Name of Employer self Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1195.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59068

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Mr. W. J Costello

Mailing Address 13633 Washburn Ave S

City State Zip Code
Burnsville MN 55337-2113

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

Name of Employer none Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59057

Amount of Each Receipt this Period
300.00

C.

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

Mailing Address 305 W. Asher St

City State Zip Code
Culpeper VA 22701

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

Name of Employer Virginia Commonwealth Occupation Public Safety

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: SA11AI.58666

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **330.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
stephen dalton

Mailing Address 1429 e hendryx ln

City State Zip Code
peoria IL 61615

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

Name of Employer Occupation
Caterpillar Inc assembler

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

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

Transaction ID: SA11AI.58697

Amount of Each Receipt this Period
25.00

B.

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

Mailing Address 1106 Ellis St.

City State Zip Code
Paducah KY 42001

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

Name of Employer Occupation
information requested information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
496.00

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

Transaction ID: SA11AI.58673

Amount of Each Receipt this Period
40.00

C.

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

Mailing Address 713 Concord Point Drive

City State Zip Code
Perryville MD 21903

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

Name of Employer Occupation
Verizon Telephone Cable Splicer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.58753

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional) ► **260.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 86
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

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

Mailing Address 713 Concord Point Drive

City State Zip Code
Perryville MD 21903

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

Name of Employer Occupation
Verizon Telephone Cable Splicer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58754

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Roger Day

Mailing Address 5984 Spruce Hollow Cove

City State Zip Code
Bartlett TN 38134

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

Name of Employer Occupation
Sedgwick CMS Project Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59086

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Charles M. Deemer

Mailing Address 21225 Talisman St

City State Zip Code
Torrance CA 90503-5403

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

Name of Employer Occupation
self bookkeeping/tax preparer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: SA11AI.58926

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional) ► **320.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 86

(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Mr. John Diaz

Mailing Address 8987 West Witchita Drive

City State Zip Code
Boise ID 83709

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

Name of Employer Occupation
retired retired

Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.59130

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Clell Drumheller

Mailing Address 7774 Pine Center Drive

City State Zip Code
Houston TX 77095

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

Name of Employer Occupation
Oxy USA Accountant

Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
315.00

Date of Receipt

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

Transaction ID: SA11AI.58825

Amount of Each Receipt this Period

195.00

C.

Full Name (Last, First, Middle Initial)
Clell Drumheller

Mailing Address 7774 Pine Center Drive

City State Zip Code
Houston TX 77095

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

Name of Employer Occupation
Oxy USA Accountant

Receipt For: 2006
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
415.00

Date of Receipt

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

Transaction ID: SA11AI.58826

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 86
(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)
Constitution Party National Committee

A.

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

Mailing Address 829 S Clear Creek Cir.

City State Zip Code
Wichita KS 67230

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

Name of Employer Occupation
candidate/housewife

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.58794

Amount of Each Receipt this Period
195.00

B.

Full Name (Last, First, Middle Initial)
Mr. Harold Dunn

Mailing Address 600 S Dowling St

City State Zip Code
Westland MI 48186-4013

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

Name of Employer Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58955

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Betty Edwards

Mailing Address 200 Dominican Drive, #5213

City State Zip Code
Madison MS 39110

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

Name of Employer Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

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

Transaction ID: SA11AI.58699

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **280.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Lee Ferris		Date of Receipt
	Mailing Address 16 Minaville Street upper		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Amsterdam	State NY	Zip Code 12010
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58742
	Name of Employer Retired		Occupation Social Services
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	Amount of Each Receipt this Period 10.00

B.	Full Name (Last, First, Middle Initial) Lee Ferris		Date of Receipt
	Mailing Address 16 Minaville Street upper		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City Amsterdam	State NY	Zip Code 12010
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58860
	Name of Employer Retired		Occupation Social Services
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 10.00

C.	Full Name (Last, First, Middle Initial) Lee Ferris		Date of Receipt
	Mailing Address 16 Minaville Street upper		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Amsterdam	State NY	Zip Code 12010
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58992
	Name of Employer Retired		Occupation Social Services
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial) Lee Ferris		Date of Receipt MM / DD / YYYY 10 / 26 / 2009
Mailing Address 16 Minaville Street upper		Transaction ID: SA11AI.59029
City Amsterdam	State NY	Zip Code 12010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Retired	Occupation Social Services	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

B.

Full Name (Last, First, Middle Initial) BOBBY FLORENTZ		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 1750 W. LAMBERT DR #130		Transaction ID: SA11AI.59097
City LA HABRA	State CA	Zip Code 90631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer self	Occupation handyman	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) Frank Fluckiger		Date of Receipt MM / DD / YYYY 10 / 08 / 2009
Mailing Address 1799 N. Highway 89		Transaction ID: SA11AI.58815
City Layton	State UT	Zip Code 84040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 195.00
Name of Employer Grassroots Organizer	Occupation CPNC	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

SUBTOTAL of Receipts This Page (optional)	▶	230.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 86
	(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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Frank Fluckiger		Date of Receipt
	Mailing Address 1799 N. Highway 89		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Layton	UT	84040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58852
Name of Employer Grassroots Organizer		Occupation CPNC	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="195.00"/>
		<input type="text" value="770.00"/>	

B.	Full Name (Last, First, Middle Initial) Frank Fluckiger		Date of Receipt
	Mailing Address 1799 N. Highway 89		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Layton	UT	84040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59048
Name of Employer Grassroots Organizer		Occupation CPNC	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
		<input type="text" value="920.00"/>	

C.	Full Name (Last, First, Middle Initial) Dan Frank		Date of Receipt
	Mailing Address 105 Misty Lane		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ephrata	PA	17522
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58821
Name of Employer RR Donnelly		Occupation IT	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="195.00"/>
		<input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="540.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Dan Frank

Mailing Address 105 Misty Lane

City State Zip Code
Ephrata PA 17522

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

Name of Employer Occupation
RR Donnelly IT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

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

Transaction ID: SA11AI.59001

Amount of Each Receipt this Period
95.00

B.

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

Mailing Address 263 Dondero Way

City State Zip Code
San Jose CA 95119

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

Name of Employer Occupation
retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
821.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58918

Amount of Each Receipt this Period
111.00

C.

Full Name (Last, First, Middle Initial)
Daniel Funer

Mailing Address 101 Center St.

City State Zip Code
Taylors SC 29687

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

Name of Employer Occupation
U.S. army combat engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

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

Transaction ID: SA11AI.58678

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **231.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 86
	<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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Mrs. Evelyn L. Gaines

Mailing Address 310 E Locust St

City State Zip Code
Watseka IL 60970-1754

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

Name of Employer Occupation
Housewife

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.58773

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Randal George

Mailing Address 53510 W Candlelight Rd

City State Zip Code
Maricopa AZ 85239-6348

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

Name of Employer Occupation
Maricopa County Arizona teacher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

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

Transaction ID: SA11AI.59050

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Neil Gertner

Mailing Address 31300 Lake Ridge Dr

City State Zip Code
Shingletown CA 96088-9790

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

Name of Employer Occupation
Schulmerich Bells Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

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

Transaction ID: SA11AI.58810

Amount of Each Receipt this Period
290.00

SUBTOTAL of Receipts This Page (optional) ► **490.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Neil Gertner

Mailing Address 31300 Lake Ridge Dr

City State Zip Code
Shingletown CA 96088-9790

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

Name of Employer Schulmerich Bells Occupation Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59036

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Neil Gertner

Mailing Address 31300 Lake Ridge Dr

City State Zip Code
Shingletown CA 96088-9790

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

Name of Employer Schulmerich Bells Occupation Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59096

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Timothy O. Goist

Mailing Address 816 Flagstone Lane

City State Zip Code
Marietta GA 30067

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

Name of Employer 52 Holding Inc. Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58793

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional) ► **320.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Timothy O. Goist

Mailing Address 816 Flagstone Lane

City Marietta State GA Zip Code 30067

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

Name of Employer 52 Holding Inc. Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.59098

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
Marcor Greenwood

Mailing Address 893 E. Kyle Ct.

City Gilbert State AZ Zip Code 85296

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

Name of Employer BNSF Railway Occupation contractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt 10 / 15 / 2009

Transaction ID: SA11AI.58928

Amount of Each Receipt this Period 225.00

C.

Full Name (Last, First, Middle Initial)
Martin F. Grifone

Mailing Address P.O. Box 332

City Vernon State NJ Zip Code 07462

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 10 / 01 / 2009

Transaction ID: SA11AI.58691

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► **285.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Laura Grout	Date of Receipt MM / DD / YYYY 10 / 31 / 2009
	Mailing Address 29159 Market Rd	Transaction ID: SA11AI.59132
	City State Zip Code Caldwell ID 83607	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self-employed Occupation childbirth instructor Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Don Grundmann	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 425 East Merle Court	Transaction ID: SA11AI.59042
	City State Zip Code San Leandro CA 94577	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation chiropractic doctor Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 295.00	

C.	Full Name (Last, First, Middle Initial) Don Grundmann	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 425 East Merle Court	Transaction ID: SA11AI.59087
	City State Zip Code San Leandro CA 94577	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation chiropractic doctor Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	155.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Brad Hall

Mailing Address P.O. Box 308

City State Zip Code
Kellyville OK 74039

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

Name of Employer Occupation
Brispoint Technologies Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

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

Transaction ID: SA11AI.58695

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Janine Hansen

Mailing Address 186 Ryndon Unit 12

City State Zip Code
Elko NV 89801

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

Name of Employer Occupation
self political consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

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

Transaction ID: SA11AI.59053

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Janine Hansen

Mailing Address 186 Ryndon Unit 12

City State Zip Code
Elko NV 89801

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

Name of Employer Occupation
self political consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

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

Transaction ID: SA11AI.59080

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) William Hatfield	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 201 Morningside Place	Transaction ID: SA11AI.58694
	City State Zip Code Independence KS 67301	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation First Christian Chjurch Minister	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Don Hawker	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 1842 E Pebble Beach Dr.	Transaction ID: SA11AI.58933
	City State Zip Code Tempe AZ 85282	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation none Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Don Hawker	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 1842 E Pebble Beach Dr.	Transaction ID: SA11AI.59085
	City State Zip Code Tempe AZ 85282	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation none Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

SUBTOTAL of Receipts This Page (optional)	▶	294.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Don Hawker		Date of Receipt
	Mailing Address 1842 E Pebble Beach Dr.		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tempe	AZ	85282
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59106
Name of Employer none		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="3.00"/>
		<input type="text" value="267.00"/>	

B.	Full Name (Last, First, Middle Initial) Leo Heinze		Date of Receipt
	Mailing Address 509 4 Ave. SW		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Long Prairie	MN	56347
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58919
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="550.00"/>	

C.	Full Name (Last, First, Middle Initial) Phillip Hendrix		Date of Receipt
	Mailing Address 558 Castle Pines Parkway		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Castle Rock	CO	80108
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58823
Name of Employer information requested		Occupation information requested	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="295.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="203.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Thom Holmes

Mailing Address P.O. Box 844

City State Zip Code
Meeker OK 74855

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

Name of Employer Occupation
Devon Energy Petroleum Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58756

Amount of Each Receipt this Period
195.00

B.

Full Name (Last, First, Middle Initial)
Mr. Thom Holmes

Mailing Address P.O. Box 844

City State Zip Code
Meeker OK 74855

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

Name of Employer Occupation
Devon Energy Petroleum Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
940.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58757

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Scott Howard

Mailing Address 102 Selwyn Court

City State Zip Code
Kathleen GA 31047

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

Name of Employer Occupation
USAF Equipment Specialist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: SA11AI.58717

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **345.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 86
	<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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Joy Howe

Mailing Address 48106 Spring Valley Pl

City State Zip Code
Brandon SD 57005-7208

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

Name of Employer Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58799

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Joy Howe

Mailing Address 48106 Spring Valley Pl

City State Zip Code
Brandon SD 57005-7208

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

Name of Employer Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1195.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2009

Transaction ID: SA11AI.58800

Amount of Each Receipt this Period
195.00

C.

Full Name (Last, First, Middle Initial)
Mark Hubler

Mailing Address 19637 W Hammond Dr

City State Zip Code
Buckeye AZ 85326-6635

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

Name of Employer Occupation
Information Requested Fire Captain

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2009

Transaction ID: SA11AI.58873

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional) ► **490.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Tom Hughes	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 1217 Greenpond Road	Transaction ID: SA11AI.58661
	City State Zip Code Fountain Inn SC 29644	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Fuji Film, Inc. Technician	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Donna L. Ivanovich	Date of Receipt MM / DD / YYYY 10 / 07 / 2009
	Mailing Address 3775 Cindy Ct	Transaction ID: SA11AI.58766
	City State Zip Code Arnold MO 63010-3804	Amount of Each Receipt this Period 195.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Saint Louis University Adm. Asst	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 735.00	

C.	Full Name (Last, First, Middle Initial) Larry Jarrell	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 15324 MOTTLEY DR	Transaction ID: SA11AI.58649
	City State Zip Code Lamirada CA 90638	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation none none	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00	

SUBTOTAL of Receipts This Page (optional)	▶	270.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Larry Jarrell

Mailing Address 15324 MOTTLEY DR

City Lamirada State CA Zip Code 90638

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

Name of Employer none Occupation none

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: SA11AI.58650
 Amount of Each Receipt this Period 35.00

B.

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

Mailing Address 2504 Crestmount Lane

City Burnsville State MN Zip Code 55306-6913

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

Name of Employer ERMC Occupation site manage

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt: 10 / 08 / 2009
Transaction ID: SA11AI.58839
 Amount of Each Receipt this Period 37.00

C.

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

Mailing Address 2504 Crestmount Lane

City Burnsville State MN Zip Code 55306-6913

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

Name of Employer ERMC Occupation site manage

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 278.00

Date of Receipt: 10 / 10 / 2009
Transaction ID: SA11AI.58855
 Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► **132.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 86
(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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Mr. Nathan Johnson

Mailing Address 6406 Friars Rd Apt 232

City San Diego State CA Zip Code 92108-1019

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

Name of Employer San Diego Transit Occupation bus driver

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 08 / 2009
Transaction ID: SA11AI.58824
 Amount of Each Receipt this Period: 195.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael J. Jose

Mailing Address 18 Hillcrest Drive #4

City Kennebunk State ME Zip Code 04043

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

Name of Employer Whatman, part of GE Health-care Occupation Research Scientist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 10 / 31 / 2009
Transaction ID: SA11AI.59131
 Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Jim King

Mailing Address 2877 Woodwardia Dr

City Los Angeles State CA Zip Code 90077-2136

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

Name of Employer self Occupation broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: SA11AI.59056
 Amount of Each Receipt this Period: 390.00

SUBTOTAL of Receipts This Page (optional) ► **615.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 86
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.

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

Mailing Address 2877 Woodwardia Dr

City State Zip Code
Los Angeles CA 90077-2136

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

Name of Employer self Occupation
self broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

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

Transaction ID: SA11AI.59100

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr. Timothy Knibbs

Mailing Address 22 Zwicks Farm Road

City State Zip Code
Southington CT 06489

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

Name of Employer UPS Occupation
UPS Transportation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.59134

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Charles Kraut

Mailing Address 4 Maple Ln

City State Zip Code
Lexington VA 24450

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

Name of Employer self Occupation
self Wealth Creation & Preservation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.58898

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional) ► **235.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Charles Kraut		Date of Receipt
	Mailing Address 4 Maple Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Lexington	VA	24450
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59039
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		Wealth Creation & Preservation	<input type="text"/> 80.00
Receipt For: 2006		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 470.00	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) John Kreider		Date of Receipt
	Mailing Address 33 Needham Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	City	State	Zip Code
	Norwich	VT	05055-9511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58663
Name of Employer Information Requested		Occupation	Amount of Each Receipt this Period
Information Requested		Information Requested	<input type="text"/> 25.00
Receipt For: 2006		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 250.00	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Mr. Robert LaLanne		Date of Receipt
	Mailing Address PO Box 38098		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	City	State	Zip Code
	Colorado Spgs	CO	80937-8098
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58672
Name of Employer Retired		Occupation	Amount of Each Receipt this Period
Retired		Retired	<input type="text"/> 35.00
Receipt For: 2006		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 280.00	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 140.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Max Lampenfeld

Mailing Address PO Box 766

City State Zip Code
Cherryville PA 18035-0766

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

Name of Employer Occupation
Tri-Star WC Businessman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58902

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Annette C. Lebow

Mailing Address 202 Oak Drive South #07

City State Zip Code
Lake Jackson TX 77566-4513

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

Name of Employer Occupation
retired retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58913

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Charles E. Leitner

Mailing Address P.O. Box 292

City State Zip Code
Fort Thomas AZ 85536-0292

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58907

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 86
	<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)
Constitution Party National Committee

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

Mailing Address 1787 S 141 PL

City State Zip Code
Gilbert AZ 85295

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

Name of Employer self Occupation
self manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

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

Transaction ID: SA11AI.58704

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bill Lussenheide

Mailing Address 29068 Walker Point Lane

City State Zip Code
Sun City CA 92585

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

Name of Employer self Occupation
self financial planning

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
745.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58931

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Bill Lussenheide

Mailing Address 29068 Walker Point Lane

City State Zip Code
Sun City CA 92585

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

Name of Employer self Occupation
self financial planning

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
845.00

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

Transaction ID: SA11AI.59082

Amount of Each Receipt this Period
100.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Brian Maday

Mailing Address 386 N 166th Ln

City State Zip Code
Goodyear AZ 85338

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

Name of Employer Occupation
Lockheed Martin Hardware Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

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

Transaction ID: SA11AI.58669

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Ross Malone

Mailing Address 1487 Clearview Road

City State Zip Code
Union MO 63084

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

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

Transaction ID: SA11AI.58818

Amount of Each Receipt this Period
195.00

C.

Full Name (Last, First, Middle Initial)
Lyle Mathews

Mailing Address 4630 State Route 155

City State Zip Code
Ruma IL 62278-2656

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

Name of Employer Occupation
information requested information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.58911

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **275.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Frank W. McBride

Mailing Address 4205 Atwood Ave

City State Zip Code
Memphis TN 38111-7909

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

Name of Employer Occupation
retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: SA11AI.58945

Amount of Each Receipt this Period
35.00

B.

Full Name (Last, First, Middle Initial)
Richard McKie

Mailing Address 3804 S. Haden Dr.

City State Zip Code
Independence MO 64055

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

Name of Employer Occupation
US Postal Service letter carrier

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: SA11AI.58665

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Lois McLain

Mailing Address 16874 - 131st Way North

City State Zip Code
Jupiter FL 33478

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

Name of Employer Occupation
Retired retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: SA11AI.58680

Amount of Each Receipt this Period
60.00

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

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

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

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

FOR LINE NUMBER: PAGE 47 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Mr. Michael S. McMullen

Mailing Address 4005 David Ln

City State Zip Code
Alexandria VA 22311-1110

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

Name of Employer Occupation
National Guard military officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2009

Transaction ID: SA11AI.58941

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Bob Miller

Mailing Address 2030 SE Marine Science Dr

City State Zip Code
Newport OR 97365-5229

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 01 / 2009

Transaction ID: SA11AI.58689

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Chad Miller

Mailing Address 5468 E 150 N

City State Zip Code
Flora IN 46929

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

Name of Employer Occupation
information requested information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 01 / 2009

Transaction ID: SA11AI.58654

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **155.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) David Miller		Date of Receipt
	Mailing Address 417B W. Foothill Blvd #313		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 07 / 2009
	City	State	Zip Code
	Glendora	CA	91741
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58752
Name of Employer Self		Occupation R.E. Developer	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 195.00
		<input type="text"/> 395.00	

B.	Full Name (Last, First, Middle Initial) David Miller		Date of Receipt
	Mailing Address 417B W. Foothill Blvd #313		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 09 / 2009
	City	State	Zip Code
	Glendora	CA	91741
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58848
Name of Employer Self		Occupation R.E. Developer	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 195.00
		<input type="text"/> 590.00	

C.	Full Name (Last, First, Middle Initial) Obadiah Neasham		Date of Receipt
	Mailing Address 562 Pheasant Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 01 / 2009
	City	State	Zip Code
	Adrian	OR	97901
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58660
Name of Employer Philip Neasham		Occupation Landscape/Maint.	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 440.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 86
(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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Leo G. Olsen

Mailing Address 3725 W. 4500 N.

City Morgan State UT Zip Code 84050

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 07 / 2009
Transaction ID: SA11AI.58791
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Orlo Paget

Mailing Address 202 Indiana St

City Neodesha State KS Zip Code 66757-1528

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

Name of Employer information requested Occupation information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 10 / 07 / 2009
Transaction ID: SA11AI.58779
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Mr. Jim Panyard

Mailing Address 6 Royal Road

City Palmyra State PA Zip Code 17078

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

Name of Employer retired Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt: 10 / 16 / 2009
Transaction ID: SA11AI.58976
Amount of Each Receipt this Period: 195.00

SUBTOTAL of Receipts This Page (optional) ► 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 86
	<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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Dorothy Peacock

Mailing Address 501 W. Glenoaks Blvd. #109

City State Zip Code
Glendale CA 91202

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

Name of Employer retired Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

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

Transaction ID: SA11AI.59055

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 4610 S Bates Road

City State Zip Code
Spokane WA 99206-9476

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

Name of Employer self Occupation property management

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
664.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.58763

Amount of Each Receipt this Period
195.00

C.

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

Mailing Address 4610 S Bates Road

City State Zip Code
Spokane WA 99206-9476

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

Name of Employer self Occupation property management

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
764.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.58764

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **395.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Robert Peck		Date of Receipt
	Mailing Address 4610 S Bates Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 7 / 2 0 0 9
	City	State	Zip Code
	Spokane	WA	99206-9476
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58765
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		property management	<input type="text"/>
Receipt For: 2006		Aggregate Year-to-Date ▼	195.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		959.00	

B.	Full Name (Last, First, Middle Initial) Robert Peck		Date of Receipt
	Mailing Address 4610 S Bates Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Spokane	WA	99206-9476
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59073
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		property management	<input type="text"/>
Receipt For: 2006		Aggregate Year-to-Date ▼	100.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		1059.00	

C.	Full Name (Last, First, Middle Initial) Robert Peck		Date of Receipt
	Mailing Address 4610 S Bates Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Spokane	WA	99206-9476
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59074
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		property management	<input type="text"/>
Receipt For: 2006		Aggregate Year-to-Date ▼	100.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		1159.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>	395.00
TOTAL This Period (last page this line number only)	<input type="text"/>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Robert Peck		Date of Receipt
	Mailing Address 4610 S Bates Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Spokane	WA	99206-9476
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59083
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		property management	<input type="text"/> 100.00
Receipt For: 2006		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 1259.00	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Mr Michael Pepin		Date of Receipt
	Mailing Address 2000 S Tecumseh Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 5 / 2 0 0 9
	City	State	Zip Code
	Springfield	OH	45502-9116
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58948
Name of Employer Self		Occupation	Amount of Each Receipt this Period
Self		Independent Distributor	<input type="text"/> 50.00
Receipt For: 2006		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 400.00	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Howard Phillips		Date of Receipt
	Mailing Address 9520 Bent Creek Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 9 / 2 0 0 9
	City	State	Zip Code
	Vienna	VA	22182
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58842
Name of Employer The Conservative Caucus Fdtn		Occupation	Amount of Each Receipt this Period
Chairman			<input type="text"/> 195.00
Receipt For: 2006		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 1695.00	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 345.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Mark Porter

Mailing Address 246 East 1100 North

City Logan State UT Zip Code 84341

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

Name of Employer Self Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: SA11AI.58734
 Amount of Each Receipt this Period 195.00

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

Mailing Address 246 East 1100 North

City Logan State UT Zip Code 84341

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

Name of Employer Self Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: SA11AI.58735
 Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Charles A Ramsell

Mailing Address 34301 Tungsten St Nw

City Princeton State MN Zip Code 55371-5011

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

Name of Employer John Hirsch's Cambridge Motors Occupation Autotechnician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: SA11AI.58904
 Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► 380.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Joseph Rawlings		Date of Receipt
	Mailing Address 8608A Hunter Loop		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Fort Drum	NY	13603
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59099
Name of Employer U.S. Army		Occupation Aviation Officer	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Melvin J. Ray		Date of Receipt
	Mailing Address 150 S 1500 W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Vernal	UT	84078-2216
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59049
Name of Employer Basin Clinic		Occupation Physician Assistant	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 710.00	<input type="text"/> 35.00

C.	Full Name (Last, First, Middle Initial) Cindy Reeves		Date of Receipt
	Mailing Address 550 Arkansas St. SE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 1 / 2 0 0 9
	City	State	Zip Code
	Rio Rancho	NM	87124
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58708
Name of Employer no employer		Occupation Caregiver	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 85.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 86						
	(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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Gary M Richards		Date of Receipt	
	Mailing Address 3262 Beckwith Rd		M M / D D / Y Y Y Y Y 10 / 15 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.58947
	Mount Juliet	TN	37122-5215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer Toshiba		Occupation Maintenance		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 530.00		

B.	Full Name (Last, First, Middle Initial) Gary M Richards		Date of Receipt	
	Mailing Address 3262 Beckwith Rd		M M / D D / Y Y Y Y Y 10 / 29 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.59065
	Mount Juliet	TN	37122-5215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer Toshiba		Occupation Maintenance		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 545.00		

C.	Full Name (Last, First, Middle Initial) Gary M Richards		Date of Receipt	
	Mailing Address 3262 Beckwith Rd		M M / D D / Y Y Y Y Y 10 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.59137
	Mount Juliet	TN	37122-5215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer Toshiba		Occupation Maintenance		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00		

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Timothy Riley

Mailing Address 29969 Horseshoe Drive

City State Zip Code
Coarsegold CA 93614

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

Name of Employer Department of Defense / California Air
Occupation Civil Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

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

Transaction ID: SA11AI.58653

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Julia Rovner

Mailing Address 3807 Ave R

City State Zip Code
Brooklyn NY 11234

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

Name of Employer Hardesty & Hanover, LLP
Occupation Administrative assistant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

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

Transaction ID: SA11AI.58817

Amount of Each Receipt this Period
195.00

C.

Full Name (Last, First, Middle Initial)
Julia Rovner

Mailing Address 3807 Ave R

City State Zip Code
Brooklyn NY 11234

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

Name of Employer Hardesty & Hanover, LLP
Occupation Administrative assistant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

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

Transaction ID: SA11AI.59095

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **245.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Jay Russell		Date of Receipt
	Mailing Address 725 New Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Churchville	PA	18966
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59037
Name of Employer Russell Gardens		Occupation Farmer	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Joe Sanger		Date of Receipt
	Mailing Address 4119 Thackin Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Lansing	MI	48911-1920
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59070
Name of Employer self		Occupation CPA	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4187.00	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Joe Sanger		Date of Receipt
	Mailing Address 4119 Thackin Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Lansing	MI	48911-1920
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59089
Name of Employer self		Occupation CPA	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4212.00	<input type="text"/> 25.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 86
	<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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Joe Sanger

Mailing Address 4119 Thackin Drive

City State Zip Code
Lansing MI 48911-1920

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

Name of Employer self Occupation
self CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4332.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2009

Transaction ID: SA11AI.58645

Amount of Each Receipt this Period
120.00

In-kind - Accounting Services

B. Full Name (Last, First, Middle Initial)
Bill Sardi

Mailing Address 457 West Allen Avenue, #117

City State Zip Code
San Dimas CA 91773

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

Name of Employer self Occupation
self Journalist/Author

Receipt For: 2006 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2009

Transaction ID: SA11AI.58812

Amount of Each Receipt this Period
390.00

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

Mailing Address PO Box 6356

City State Zip Code
Crestline CA 92325-6356

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

Name of Employer none Occupation
none homemaker

Receipt For: 2006 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: SA11AI.58922

Amount of Each Receipt this Period
325.00

SUBTOTAL of Receipts This Page (optional) ► **835.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 86
(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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Bernhard Sengstock

Mailing Address 22 The Helm

City East Islip State NY Zip Code 11730

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

Name of Employer self Occupation chiropractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 01 / 2009

Transaction ID: SA11AI.58701

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Bernhard Sengstock

Mailing Address 22 The Helm

City East Islip State NY Zip Code 11730

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

Name of Employer self Occupation chiropractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1245.00

Date of Receipt 10 / 09 / 2009

Transaction ID: SA11AI.58844

Amount of Each Receipt this Period 195.00

C.

Full Name (Last, First, Middle Initial)
Bernhard Sengstock

Mailing Address 22 The Helm

City East Islip State NY Zip Code 11730

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

Name of Employer self Occupation chiropractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1345.00

Date of Receipt 10 / 29 / 2009

Transaction ID: SA11AI.59043

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 345.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 86
	<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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Bernhard Sengstock

Mailing Address 22 The Helm

City East Islip State NY Zip Code 11730

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

Name of Employer self Occupation chiropractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1445.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: SA11AI.59077
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Janet Yeany Serene

Mailing Address 1116 Salem Rd

City Mayport State PA Zip Code 16240-7224

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

Name of Employer Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.59018
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Gary Shumway

Mailing Address 1338 Foothill Dr. #327

City Salt Lake City State UT Zip Code 84108

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

Name of Employer E.H. Publishing, LLC Occupation Publisher/Programmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 07 / 2009
Transaction ID: SA11AI.58797
 Amount of Each Receipt this Period: 195.00

SUBTOTAL of Receipts This Page (optional) ► **395.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Gary Shumway	Date of Receipt MM / DD / YYYY 10 / 07 / 2009
	Mailing Address 1338 Foothill Dr. #327	Transaction ID: SA11AI.58798
	City State Zip Code Salt Lake City UT 84108	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation E.H. Publishing, LLC Publisher/Programmer	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

B.	Full Name (Last, First, Middle Initial) Mark Siffer	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 1964 S. Mara Drive	Transaction ID: SA11AI.59092
	City State Zip Code Apache Junction AZ 85120	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation EchoStar Broadcasting Company Broadcasting	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mr. William G. Skillman	Date of Receipt MM / DD / YYYY 10 / 14 / 2009
	Mailing Address 237 Johnnys Way	Transaction ID: SA11AI.58893
	City State Zip Code Kyle TX 78640-5662	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 86
(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)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial)
Dr. Gary C. Smith

Mailing Address 2910 Pearl Street Rd

City State Zip Code
Batavia NY 14020-9530

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

Name of Employer self Occupation physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: SA11AI.58956

Amount of Each Receipt this Period
30.00

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

Mailing Address 15257 Alondra Blvd

City State Zip Code
La Mirada CA 90638

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

Name of Employer NTS Occupation Fiber Optic Tech

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: SA11AI.58952

Amount of Each Receipt this Period
225.00

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

Mailing Address 15257 Alondra Blvd

City State Zip Code
La Mirada CA 90638

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

Name of Employer NTS Occupation Fiber Optic Tech

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: SA11AI.59078

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **305.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Fabian Sparrow	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 3701 Deerfield Dr.	Transaction ID: SA11AI.58705
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Southern Showcase Housing Occupation Manager Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

B.	Full Name (Last, First, Middle Initial) Scott Stafford	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 1362 Dearing Downs Cir	Transaction ID: SA11AI.58664
	City State Zip Code Helena AL 35080	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Compass Bank Occupation Programmer / Analyst Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00

C.	Full Name (Last, First, Middle Initial) Jason Stahl	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 1518 E. 9th street	Transaction ID: SA11AI.58676
	City State Zip Code Moundsville WV 26041	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.00

SUBTOTAL of Receipts This Page (optional)	575.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 86
	<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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
Jason Stahl

Mailing Address 1518 E. 9th street

City Moundsville State WV Zip Code 26041

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt 10 / 01 / 2009

Transaction ID: SA11AI.58684

Amount of Each Receipt this Period 35.00

B.

Full Name (Last, First, Middle Initial)
Thom Strawn

Mailing Address 1040 Lois Drive

City Prescott State AZ Zip Code 86301

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

Name of Employer self employed Occupation Journalist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 08 / 2009

Transaction ID: SA11AI.58828

Amount of Each Receipt this Period 195.00

C.

Full Name (Last, First, Middle Initial)
Harley Swarm, Jr.

Mailing Address 10030 Norway ST NW

City Coon Rapids State MN Zip Code 55433

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

Name of Employer University of Minnesota Occupation maintenance mechanic

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 02 / 2009

Transaction ID: SA11AI.58737

Amount of Each Receipt this Period 195.00

SUBTOTAL of Receipts This Page (optional) ► 425.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Harley Swarm, Jr.		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 10030 Norway ST NW		Transaction ID: SA11AI.59069		
	City Coon Rapids	State MN	Zip Code 55433	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer University of Minnesota	Occupation maintenance mechanic			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 920.00			

B.	Full Name (Last, First, Middle Initial) Harley Swarm, Jr.		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 10030 Norway ST NW		Transaction ID: SA11AI.59091		
	City Coon Rapids	State MN	Zip Code 55433	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer University of Minnesota	Occupation maintenance mechanic			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 945.00			

C.	Full Name (Last, First, Middle Initial) Mr. Mitch Turner		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 39465 Charles Town Pike		Transaction ID: SA11AI.58903		
	City Hamilton	State VA	Zip Code 20158-3321	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Home School Legal Defense	Occupation Director of Web Services			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 86
(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)
Constitution Party National Committee

A.

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

Mailing Address 1002 N D St

City Parma State ID Zip Code 83660-5544

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

Name of Employer Electronic Data Systems Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt 10 / 22 / 2009
Transaction ID: SA11AI.59011
Amount of Each Receipt this Period 450.00

B.

Full Name (Last, First, Middle Initial)
Mike Von Savoye

Mailing Address P.O. Box 21311

City Concord State CA Zip Code 94518

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

Name of Employer City of Concord Occupation Law Enforcement

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 20 / 2009
Transaction ID: SA11AI.58993
Amount of Each Receipt this Period 225.00

C.

Full Name (Last, First, Middle Initial)
Mike Von Savoye

Mailing Address P.O. Box 21311

City Concord State CA Zip Code 94518

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

Name of Employer City of Concord Occupation Law Enforcement

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 29 / 2009
Transaction ID: SA11AI.59084
Amount of Each Receipt this Period 25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 86
	<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)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)
James Wade

Mailing Address PO Box 9500

City State Zip Code
Huntsville TX 77340-0025

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

Name of Employer self Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2009

Transaction ID: SA11AI.58835

Amount of Each Receipt this Period
195.00

B.

Full Name (Last, First, Middle Initial)
James Wade

Mailing Address PO Box 9500

City State Zip Code
Huntsville TX 77340-0025

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

Name of Employer self Occupation consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2009

Transaction ID: SA11AI.58836

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. James J Wall

Mailing Address 12736 Robindale Dr

City State Zip Code
Rockville MD 20853-3441

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

Name of Employer Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2009

Transaction ID: SA11AI.59129

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Darrell White		Date of Receipt
	Mailing Address 15252 Road 5 N		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Pandora	OH	45877
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer retired		Occupation retired	Transaction ID: SA11AI.58787
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="315.00"/>	<input type="text" value="35.00"/>

B.	Full Name (Last, First, Middle Initial) Reldon White		Date of Receipt
	Mailing Address 84 North 1050 East		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bountiful	UT	84010
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer retired		Occupation retired	Transaction ID: SA11AI.59054
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="435.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. LeRoy J. Whitman, Jr.		Date of Receipt
	Mailing Address 235 Trailorama Dr		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	North Port	FL	34287
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SIL		Occupation Linguist	Transaction ID: SA11AI.58674
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="315.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 86
	<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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Mr. Calvin H. Wortman		Date of Receipt
	Mailing Address 356 Woodruff Ave		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Avenel	NJ	07001-1138
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58751
Name of Employer Empire Lube corp		Occupation sales	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="390.00"/>
		<input type="text" value="1010.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Calvin H. Wortman		Date of Receipt
	Mailing Address 356 Woodruff Ave		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Avenel	NJ	07001-1138
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.58805
Name of Employer Empire Lube corp		Occupation sales	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="260.00"/>
		<input type="text" value="1270.00"/>	

C.	Full Name (Last, First, Middle Initial) William P. Wortman		Date of Receipt
	Mailing Address 1612 E 6th St		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tulsa	OK	74120-4028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.59135
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="585.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 70 / 86	
	(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)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Wayne Zimmerschied		Date of Receipt																					
	Mailing Address 411 Adams Drive West		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	8		2	0	0	9														
	City State Zip Code Young America MN 55397		Transaction ID: SA11AI.58832																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																					
Name of Employer Occupation Beckman Coulter computer programmer																								
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.00																						

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	29857.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.58642 Date of Disbursement 10 / 31 / 2009
	Mailing Address P.O. Box 1270	Amount of Each Disbursement this Period 2241.19
	City Newark State NJ Zip Code 07101	
	Purpose of Disbursement Reimburse travel, lodging, printing, supplies	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) AT & T	Transaction ID: SB21B.58637 Date of Disbursement 10 / 31 / 2009
	Mailing Address P.O. Box 9001309	Amount of Each Disbursement this Period 83.25
	City Louisville State KY Zip Code 40290-1309	
	Purpose of Disbursement Telephone Services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) AT & T Mobility	Transaction ID: SB21B.58636 Date of Disbursement 10 / 31 / 2009
	Mailing Address P.O. Box 6463	Amount of Each Disbursement this Period 140.18
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Telephone Services	
	Candidate Name	Category/Type
	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)	▶	2464.62
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

<p>A. Full Name (Last, First, Middle Initial) Authorize.Net</p> <p>Mailing Address 915 South 500 East, Suite 200</p> <p>City American Fork State UT Zip Code 84003</p> <p>Purpose of Disbursement Electronic Gateway Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.58602</p> <p>Date of Disbursement 10 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 55.90</p>
<p>B. Full Name (Last, First, Middle Initial) D. Scott Bartlett</p> <p>Mailing Address 5905 W.Bakker Park Drive</p> <p>City Sioux Falls State SD Zip Code 57106</p> <p>Purpose of Disbursement Reimburse printing & postage expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.58641</p> <p>Date of Disbursement 10 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 425.00</p>
<p>C. Full Name (Last, First, Middle Initial) Capital One</p> <p>Mailing Address P.O. Box 70884</p> <p>City Charlotte State NC Zip Code 28272-0884</p> <p>Purpose of Disbursement Reimburse meeting exp, phone, supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.58630</p> <p>Date of Disbursement 10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 201.20</p>

SUBTOTAL of Disbursements This Page (optional) ▶

682.10

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Damascus	Transaction ID: SB21B.58639
	Mailing Address 108 Meadows Lane	Date of Disbursement 10 / 31 / 2009
	City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Database Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Embassy Suites Phoenix Airport	Transaction ID: SB21B.58632
	Mailing Address 1515 North 44th Street	Date of Disbursement 10 / 24 / 2009
	City Phoenix State AZ Zip Code 85008	Amount of Each Disbursement this Period 13501.97
	Purpose of Disbursement Meeting Expenses	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Frank Fluckiger	Transaction ID: SB21B.58618
	Mailing Address 1799 N. Highway 89	Date of Disbursement 10 / 23 / 2009
	City Layton State UT Zip Code 84040	Amount of Each Disbursement this Period 2700.00
	Purpose of Disbursement Fee - field coordination	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)	16801.97
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial) Internal Revenue Service <hr/> Mailing Address P.O. Box 660264 <hr/> City Dallas State TX Zip Code 75266 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.58610 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2616.11
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) JAB Media <hr/> Mailing Address 10194 SE 147th Avenue <hr/> City Portland State OR Zip Code 97236 <hr/> Purpose of Disbursement Shipping Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.58634 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 34.00
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) NJ-Division of Revenue <hr/> Mailing Address P.O. Box 632 <hr/> City Trenton State NJ Zip Code 08646 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.58612 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 236.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2886.11
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial) NJ SUTA Mailing Address P.O. Box 252 City Trenton State NJ Zip Code 08646 Purpose of Disbursement Payroll Taxes 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) ▼	Transaction ID: SB21B.58614 Date of Disbursement 10 / 15 / 2009
	Amount of Each Disbursement this Period 361.52
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Gary Odom Mailing Address 23 N Lime St City Lancaster State PA Zip Code 17602-2912 Purpose of Disbursement Compensation 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) ▼	Transaction ID: SB21B.58620 Date of Disbursement 10 / 23 / 2009
	Amount of Each Disbursement this Period 2817.65
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) PA Department of Revenue Mailing Address Dept. 280415 City Harrisburg State PA Zip Code 17128-0415 Purpose of Disbursement Payroll Taxes 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) ▼	Transaction ID: SB21B.58608 Date of Disbursement 10 / 15 / 2009
	Amount of Each Disbursement this Period 416.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3595.17
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 76 / 86

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Pitney Bowes	Transaction ID: SB21B.58629
	Mailing Address P.O. Box 856390	Date of Disbursement 10 / 16 / 2009
	City Louisville State KY Zip Code 40285-6390	Amount of Each Disbursement this Period 240.00
	Purpose of Disbursement Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alison Potter	Transaction ID: SB21B.58616
	Mailing Address 41 Meadowburn Road	Date of Disbursement 10 / 30 / 2009
	City Vernon State NJ Zip Code 07462	Amount of Each Disbursement this Period 3288.70
	Purpose of Disbursement compensation Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Alison Potter	Transaction ID: SB21B.58644
	Mailing Address 41 Meadowburn Road	Date of Disbursement 10 / 31 / 2009
	City Vernon State NJ Zip Code 07462	Amount of Each Disbursement this Period 51.50
	Purpose of Disbursement Reimburse Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3580.20
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Joe Sager	Transaction ID: SB21B.58626 Date of Disbursement 10 / 16 / 2009
	Mailing Address P.O. Box 1917	
	City Willis State TX Zip Code 77378	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Webmaster Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joe Sanger	Transaction ID: SB21B.58646 Date of Disbursement 10 / 31 / 2009
	Mailing Address 4119 Thackin Drive	
	City Lansing State MI Zip Code 48911-1920	Amount of Each Disbursement this Period 120.00
	Purpose of Disbursement In-kind - Accounting Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mary Starrett	Transaction ID: SB21B.58623 Date of Disbursement 10 / 15 / 2009
	Mailing Address 35775 NE Smith Rd	
	City Newberg State OR Zip Code 97132	Amount of Each Disbursement this Period 2367.75
	Purpose of Disbursement Fee - Communications Director Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2787.75
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Constitution Party National Committee

<p>A. Full Name (Last, First, Middle Initial) Mary Starrett</p> <p>Mailing Address 35775 NE Smith Rd</p> <p>City Newberg State OR Zip Code 97132</p> <p>Purpose of Disbursement Reimburse wireless expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.58625</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="148.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Treasurer of Virginia, State Corp. Commission</p> <p>Mailing Address P.O. Box 85022</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Annual Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.58635</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address P.O. Box 17398</p> <p>City Baltimore State MD Zip Code 21297-0429</p> <p>Purpose of Disbursement Telephone Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.58628</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="312.55"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="495.55"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: SB21B.58601
	Mailing Address 212 East Maple Avenue	Date of Disbursement 10 / 12 / 2009
	City Vienna State VA Zip Code 22180	Amount of Each Disbursement this Period 63.03
	Purpose of Disbursement Bank Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: SB21B.58600
	Mailing Address 212 East Maple Avenue	Date of Disbursement 10 / 30 / 2009
	City Vienna State VA Zip Code 22180	Amount of Each Disbursement this Period 857.43
	Purpose of Disbursement Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Danielle Warren	Transaction ID: SB21B.58627
	Mailing Address 586 East Front Street	Date of Disbursement 10 / 16 / 2009
	City Marietta State PA Zip Code 17547	Amount of Each Disbursement this Period 738.20
	Purpose of Disbursement Compensation	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)	1658.66
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.	Full Name (Last, First, Middle Initial) Danielle Warren	Transaction ID: SB21B.58631
	Mailing Address 586 East Front Street	Date of Disbursement 10 / 23 / 2009
	City Marietta State PA Zip Code 17547	Amount of Each Disbursement this Period 716.35
	Purpose of Disbursement Compensation Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Danielle Warren	Transaction ID: SB21B.58638
	Mailing Address 586 East Front Street	Date of Disbursement 10 / 31 / 2009
	City Marietta State PA Zip Code 17547	Amount of Each Disbursement this Period 726.28
	Purpose of Disbursement Compensation Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) West Chestnut Associates	Transaction ID: SB21B.58640
	Mailing Address 408 West Chestnut Street	Date of Disbursement 10 / 31 / 2009
	City Lancaster State PA Zip Code 17603	Amount of Each Disbursement this Period 510.00
	Purpose of Disbursement Office Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1952.63
TOTAL This Period (last page this line number only)	36904.76

**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 81 / 86

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

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NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A.

Full Name (Last, First, Middle Initial)

Mark S. Alper

Transaction ID: SB28A.58605

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	0		3	0		2	0	0	9

Mailing Address 2701 Rusty Oak Drive

City State Zip Code
New Port Richey FL 34653

Amount of Each Disbursement this Period

35.00

Purpose of Disbursement
Refund contribution to donor

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

35.00

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

35.00

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Constitution Party National Committee

Transaction ID: SC/9.6657

LOAN SOURCE Full Name (Last, First, Middle Initial) Constitution Party of Texas	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3240 Blue-Bonnet Boulevard	
City Brenham State TX ZIP Code 77833	

Original Amount of Loan 5000.00	Cumulative Payment To Date 3795.70	Balance Outstanding at Close of This Period 1204.30
------------------------------------	---------------------------------------	--

TERMS

Date Incurred MM DD YY 05 09 1996	Date Due []	Interest Rate [] % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	-----------------	------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	1204.30
TOTALS This Period (last page in this line only)	1204.30

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Frank Fluckiger			Nature of Debt (Purpose): Fee for Field Coordination Services
Mailing Address 1799 N. Highway 89			
City Layton	State UT	ZIP Code 84040	

Outstanding Balance Beginning This Period <input type="text" value="2700.00"/>		Transaction ID: SD10.56858	
Amount Incurred This Period <input type="text" value="2700.00"/>	Payment This Period <input type="text" value="2700.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2700.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): taxes
Mailing Address P.O. Box 660264			
City Dallas	State TX	ZIP Code 75266	

Outstanding Balance Beginning This Period <input type="text" value="6032.68"/>		Transaction ID: SD10.47279	
Amount Incurred This Period <input type="text" value="2745.99"/>	Payment This Period <input type="text" value="2616.11"/>	Outstanding Balance at Close of This Period <input type="text" value="6162.56"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NJ-Division of Revenue			Nature of Debt (Purpose): taxes
Mailing Address P.O. Box 632			
City Trenton	State NJ	ZIP Code 08646	

Outstanding Balance Beginning This Period <input type="text" value="472.00"/>		Transaction ID: SD10.50301	
Amount Incurred This Period <input type="text" value="118.00"/>	Payment This Period <input type="text" value="236.00"/>	Outstanding Balance at Close of This Period <input type="text" value="354.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9216.56"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NJ SUTA			Nature of Debt (Purpose): Taxes
Mailing Address P.O. Box 252			
City Trenton	State NJ	ZIP Code 08646	

Outstanding Balance Beginning This Period 336.06		Transaction ID: SD10.53421	
Amount Incurred This Period 25.46	Payment This Period 361.52	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gary Odom			Nature of Debt (Purpose): Salary
Mailing Address 23 N Lime St			
City Lancaster	State PA	ZIP Code 17602-2912	

Outstanding Balance Beginning This Period 2817.65		Transaction ID: SD10.56862	
Amount Incurred This Period 2817.66	Payment This Period 2817.65	Outstanding Balance at Close of This Period 2817.66	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PA Department of Revenue			Nature of Debt (Purpose): taxes
Mailing Address Dept. 280415			
City Harrisburg	State PA	ZIP Code 17128-0415	

Outstanding Balance Beginning This Period 586.00		Transaction ID: SD10.39789	
Amount Incurred This Period 247.00	Payment This Period 416.00	Outstanding Balance at Close of This Period 417.00	

1) SUBTOTALS This Period This Page (optional).....	▶	3234.66
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alison Potter			Nature of Debt (Purpose): Salary
Mailing Address 41 Meadowburn Road			
City Vernon	State NJ	ZIP Code 07462	

Outstanding Balance Beginning This Period <input type="text" value="6577.40"/>		Transaction ID: SD10.54869	
Amount Incurred This Period <input type="text" value="3288.70"/>	Payment This Period <input type="text" value="3288.70"/>	Outstanding Balance at Close of This Period <input type="text" value="6577.40"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alison Potter			Nature of Debt (Purpose): Medical Insurance
Mailing Address 41 Meadowburn Road			
City Vernon	State NJ	ZIP Code 07462	

Outstanding Balance Beginning This Period <input type="text" value="3559.98"/>		Transaction ID: SD10.56864	
Amount Incurred This Period <input type="text" value="593.33"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4153.31"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Response Unlimited			Nature of Debt (Purpose): printing, mailing & list rental services
Mailing Address 284 Shalom Road			
City Waynesboro	State VA	ZIP Code 22980-9111	

Outstanding Balance Beginning This Period <input type="text" value="4526.00"/>		Transaction ID: SD10.38691	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4526.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="15256.71"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Constitution Party National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mary Starrett			Nature of Debt (Purpose): Communications Director Fee
Mailing Address 35775 NE Smith Rd			
City Newberg	State OR	ZIP Code 97132	

Outstanding Balance Beginning This Period <input type="text" value="2367.75"/>		Transaction ID: SD10.56860	
Amount Incurred This Period <input type="text" value="2367.75"/>	Payment This Period <input type="text" value="2367.75"/>	Outstanding Balance at Close of This Period <input type="text" value="2367.75"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mary Starrett			Nature of Debt (Purpose): Wireless Expenses
Mailing Address 35775 NE Smith Rd			
City Newberg	State OR	ZIP Code 97132	

Outstanding Balance Beginning This Period <input type="text" value="148.00"/>		Transaction ID: SD10.56861	
Amount Incurred This Period <input type="text" value="148.00"/>	Payment This Period <input type="text" value="148.00"/>	Outstanding Balance at Close of This Period <input type="text" value="148.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2515.75"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="30223.68"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="30223.68"/>