

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
PMA Group Political Action Committee

ADDRESS (number and street) 2345 Crystal Drive
Suite 300
 Check if different than previously reported. (ACC)
Arlington VA 22202

2. **FEC IDENTIFICATION NUMBER** C00280321
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2008 through 01 31 2008

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

Type or Print Name of Treasurer Joseph S. Littleton, III

Signature of Treasurer Electronically Filed by Joseph S. Littleton, III Date 02 11 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
PMA Group Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		17956.34
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	17956.34									
(c) Total Receipts (from Line 19)	35455.00	35455.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	53411.34	53411.34								
7. Total Disbursements (from Line 31)	16000.00	16000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37411.34	37411.34								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
PMA Group Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	35435.00	35435.00
(i) Itemized (use Schedule A)	20.00	20.00
(ii) Unitemized	35455.00	35455.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35455.00	35455.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35455.00	35455.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35455.00	35455.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	16000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16000.00	16000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16000.00	16000.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	35455.00	35455.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35455.00	35455.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 13
(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)
PMA Group Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mrs. Becky DeRosa

Mailing Address 22014 Foxlair Road

City Gaithersburg State MD Zip Code 20882

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

Name of Employer The PMA Group, Inc. Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 07 / 2008

Transaction ID: SA11AI.9253

Amount of Each Receipt this Period 5000.00

Contribution

B.

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

Mailing Address 6400 Velleity Lane

City Springfield State VA Zip Code 22152

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

Name of Employer The PMA Group Occupation Vice President, Defense

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt 01 / 28 / 2008

Transaction ID: SA11AI.9259

Amount of Each Receipt this Period 435.00

Contribution

C.

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

Mailing Address 4500 S. 28th Road, Unit D

City Arlington State VA Zip Code 22206

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

Name of Employer The PMA Group, Inc. Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 28 / 2008

Transaction ID: SA11AI.9258

Amount of Each Receipt this Period 5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **10435.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Mr. Rich Kaelin</p> <p>Mailing Address 13211 Dodie Drive</p> <p>City State Zip Code Darnestown MD 20878</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: The PMA Group, Inc. Occupation: Associate</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt 01 / 11 / 2008</p> <p>Transaction ID: SA11AI.9254</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) John Lynch</p> <p>Mailing Address 16719 Ostenbury Ct.</p> <p>City State Zip Code Dumfries VA 22026</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: The PMA Group, Inc. Occupation: Associate</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt 01 / 18 / 2008</p> <p>Transaction ID: SA11AI.9256</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Linda Lynch</p> <p>Mailing Address 16719 Ostenbury Ct.</p> <p>City State Zip Code Dumfries VA 22026</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: N/A Occupation: Homemaker</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt 01 / 18 / 2008</p> <p>Transaction ID: SA11AI.9257</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 13

(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)
PMA Group Political Action Committee

A.

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

Mailing Address 10203 Woodvale Pond Drive

City State Zip Code
Fairfax Station VA 22039

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

Name of Employer Occupation
The PMA Group, Inc. Associate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.9260

Amount of Each Receipt this Period

5000.00

Contribution

B.

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

Mailing Address 1221 South Eads Street, #1707

City State Zip Code
Arlington VA 22202

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

Name of Employer Occupation
The PMA Group, Inc. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.9252

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

35435.00

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

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

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 14

Transaction ID: SB23.9268

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address PO Box A

City Clarks Summit State PA Zip Code 18411

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 10

Transaction ID: SB23.9262

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ME District: 00

Transaction ID: SB23.9272

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 13

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

A.	Full Name (Last, First, Middle Initial) DREIER FOR CONGRESS COMMITTEE	Transaction ID: SB23.9265 Date of Disbursement
	Mailing Address P.O. BOX 505	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City UPLAND State CA Zip Code 91785	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF CAROLYN MCCARTHY	Transaction ID: SB23.9269 Date of Disbursement
	Mailing Address 151 LINDEN ROAD	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City MINEOLA State NY Zip Code 11501	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MCCOLLUM FOR CONGRESS	Transaction ID: SB23.9267 Date of Disbursement
	Mailing Address P.O. Box 14131	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City St. Paul State MN Zip Code 55114	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

A.	Full Name (Last, First, Middle Initial) MIKE HONDA FOR CONGRESS	Transaction ID: SB23.9266
	Mailing Address 111 W ST JOHN STREET SUITE 400	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City SAN JOSE State CA Zip Code 95113	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NITA LOWEY FOR CONGRESS	Transaction ID: SB23.9264
	Mailing Address PO BOX 271	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City WHITE PLAINS State NY Zip Code 10605	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SHERMAN FOR CONGRESS	Transaction ID: SB23.9273
	Mailing Address 555 SOUTH FLOWER STREET SUITE 4510	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City LOS ANGELES State CA Zip Code 90071	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

A.	Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.9261
	Mailing Address PO BOX 500	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NH District: 01	

B.	Full Name (Last, First, Middle Initial) TEXANS FOR SENATOR JOHN CORNYN INC	Transaction ID: SB23.9263
	Mailing Address 6850 AUSTIN CENTRE BLVD SUITE 180	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City AUSTIN State TX Zip Code 78731	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 00	

C.	Full Name (Last, First, Middle Initial) TIAHRT FOR CONGRESS	Transaction ID: SB23.9270
	Mailing Address 2250 N ROCK RD #118A	Date of Disbursement MM / DD / YYYY 01 / 31 / 2008
	City WICHITA State KS Zip Code 67226	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: KS District: 04	

SUBTOTAL of Disbursements This Page (optional)	4000.00
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TOTAL This Period (last page this line number only)	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

A.

Full Name (Last, First, Middle Initial)
TIM WALZ FOR US CONGRESS

Transaction ID: SB23.9275

Date of Disbursement

Mailing Address PO BOX 938

^M <input type="text" value="0"/>	^M <input type="text" value="1"/>	/	^D <input type="text" value="3"/>	^D <input type="text" value="1"/>	/	^Y <input type="text" value="2"/>	^Y <input type="text" value="0"/>	^Y <input type="text" value="0"/>	^Y <input type="text" value="8"/>
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City MANKATO State MN Zip Code 56002

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MN District: 01

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

16000.00
