

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Capital One Financial Corp. Assoc. Political Fund

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

2. **FEC IDENTIFICATION NUMBER** C00326595  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 07 01 2006 through 09 30 2006

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

Type or Print Name of Treasurer Richard Olson

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		185483.86
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	163748.76									
(c) Total Receipts (from Line 19) .....	102380.61	434145.51								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	266129.37	619629.37								
7. Total Disbursements (from Line 31) .....	147750.00	501250.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	118379.37	118379.37								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	86797.48	321689.68
(i) Itemized (use Schedule A) .....	15583.13	49103.75
(ii) Unitemized .....	102380.61	370793.43
(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) .....	102380.61	370793.43
12. Transfers From Affiliated/Other Party Committees .....	0.00	63352.08
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)) .....	102380.61	434145.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	102380.61	434145.51

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	145000.00	487500.00
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.....	2750.00	13750.00
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))..	147750.00	501250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	147750.00	501250.00

**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) .....	102380.61	370793.43
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	102380.61	370793.43
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Richard D Fairbank		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006	
Mailing Address 1403 Langley PI		<b>Transaction ID:</b> 12789150	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Capital One	Occupation Chairman/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Brian W. Fairbank		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2006	
Mailing Address 1403 Langley Place		<b>Transaction ID:</b> 12789151	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Student	Occupation Student		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Carl R. Fairbank		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006	
Mailing Address 1403 Langley Place		<b>Transaction ID:</b> 12789152	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Student	Occupation Student		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Christine U. Fairbank		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006	
Mailing Address 1403 Langley Place		<b>Transaction ID:</b> 12789153	
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Sanjiv Yajnik		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2006	
Mailing Address 424 Weston Way		<b>Transaction ID:</b> 12973558	
City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Capital One VP, Marketing & Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lawrence J. Stein		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address 6503 Heather Brook Ct		<b>Transaction ID:</b> PR1000609917625	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Policy Affairs SVP, Government Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00		
		P/R Deduction (\$208.33 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	9500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Michael Glotz</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 12605 Wheat Ter		<b>Transaction ID: PR1001510317625</b>
City Richmond State VA Zip Code 23233	Amount of Each Receipt this Period _____ 375.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Chief Auditor	Occupation Managing VP, Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1125.00	

Full Name (Last, First, Middle Initial) <b>B. John Fassl</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 14014 Saddle River Dr		<b>Transaction ID: PR1001510417625</b>
City North Potomac State MD Zip Code 20878	Amount of Each Receipt this Period _____ 375.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Compliance - Central Services	Occupation VP, Enterprise Risk Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1125.00	

Full Name (Last, First, Middle Initial) <b>C. Kevin Mason</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 13501 Rivermist Road		<b>Transaction ID: PR1001510517625</b>
City Midlothian State VA Zip Code 23113	Amount of Each Receipt this Period _____ 187.50	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$31.25 Semi-Monthly)
Name of Employer Data Risk Management	Occupation VP, IT Data Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 562.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>937.50</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Ruth Clay</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 12100 Loxton Court		<b>Transaction ID: PR1012199617625</b>	
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period _____ 126.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Client Support - Banking	Occupation VP, HR Client Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 378.00		P/R Deduction (\$21.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Steve Arneson</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1425 Hague Drive		<b>Transaction ID: PR1036126517625</b>	
City State Zip Code Leesburg VA 20175	Amount of Each Receipt this Period _____ 500.10		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Executive Development	Occupation SVP, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1500.30		P/R Deduction (\$83.35 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Patrick Deck</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 11141 Manor View Dr		<b>Transaction ID: PR1036126617625</b>	
City State Zip Code Mechanicsville VA 23116	Amount of Each Receipt this Period _____ 90.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Customer Fulfillment Exec	Occupation Sr. Director, Supplier Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 270.00		P/R Deduction (\$15.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>716.10</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Steven Zykoski</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1036126717625
Mailing Address 103 Durrington Ct		Amount of Each Receipt this Period 200.04
City Richmond State VA Zip Code 23236	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$33.34 Semi-Monthly)
Name of Employer Infrastructure finance Occupation Director, Financial Management	Aggregate Year-to-Date 600.12	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Jason Pletcher</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1036126917625
Mailing Address 4808 Moorland Lane Unit 905		Amount of Each Receipt this Period 90.00
City Bethesda State MD Zip Code 20814	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$15.00 Semi-Monthly)
Name of Employer SF-Strategic Finance Occupation Business Director, Finance	Aggregate Year-to-Date 270.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Douglas J. Taylor</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1036133417625
Mailing Address 12209 Hampton Valley Turn		Amount of Each Receipt this Period 200.04
City Chesterfield State VA Zip Code 23832	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$33.34 Semi-Monthly)
Name of Employer Up Market Account Mgmt Occupation Sr Business Director	Aggregate Year-to-Date 600.12	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	490.08
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Chris Webb		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039328417625	
Mailing Address 1912 Esquire Road		Amount of Each Receipt this Period 150.00	
City Richmond	State VA	Zip Code 23235	P/R Deduction (\$25.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 450.00	
Name of Employer Marketing Platforms	Occupation Manager, Project Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Sarah Gravitt-Baese		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039328517625	
Mailing Address 4316 Cutshaw Ave.		Amount of Each Receipt this Period 438.00	
City Richmond	State VA	Zip Code 23230	P/R Deduction (\$73.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 1314.00	
Name of Employer Brand US Card Strategy	Occupation VP, Brand Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Ashish Masih		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039328917625	
Mailing Address 11609 Hearthstone Drive		Amount of Each Receipt this Period 300.00	
City Glen Allen	State VA	Zip Code 23059	P/R Deduction (\$50.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 900.00	
Name of Employer Legal Administration	Occupation VP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>888.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Lynne Laube		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039329517625
Mailing Address 2913 Calcutt Drive		Amount of Each Receipt this Period 375.00
City Midlothian	State VA	Zip Code 23113
FEC ID number of contributing federal political committee. C		P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Payments M&A	Occupation VP, Operations Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Charles Rosenblatt		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1040336517625
Mailing Address Avalon at Mission Bay 255 Kina Street		Amount of Each Receipt this Period 95.46
City San Francisco	State CA	Zip Code 94107
FEC ID number of contributing federal political committee. C		P/R Deduction (\$31.82 Semi-Monthly)
Name of Employer Subprime Account Management	Occupation Sr. Mktng An Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 477.30	

Full Name (Last, First, Middle Initial) <b>C.</b> Scott Barton		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1040336617625
Mailing Address 11420 Harcourt Ter		Amount of Each Receipt this Period 750.00
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Capital One	Occupation SVP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1220.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Susan Batura</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 219 East Brook Run Drive		<b>Transaction ID: PR1067721117625</b>
City State Zip Code Richmond VA 23238	Amount of Each Receipt this Period _____ 1248.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Occupation Audit - US Card and GFS VP, Audit Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3744.00	P/R Deduction (\$208.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Robert Rose</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 9629 Parkwood Drive		<b>Transaction ID: PR1076522817625</b>
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period _____ 240.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Occupation Associate Compensation SVP, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 720.00	P/R Deduction (\$40.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Sallie Larsen</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7300 Hooking Road		<b>Transaction ID: PR1076522917625</b>
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period _____ 375.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Occupation HR Communications Managing VP, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1125.00	P/R Deduction (\$62.50 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1863.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 82		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) <b>A. James Campbell</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 7359 Jefferson Mill Road		<b>Transaction ID: PR1086858517625</b>		
City State Zip Code Scottsville VA 24590	Amount of Each Receipt this Period _____ 750.00		P/R Deduction (\$125.00 Se- mi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b> _____		_____		
Name of Employer Occupation US Card Finance SVP, Finance	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ 2250.00			

Full Name (Last, First, Middle Initial) <b>B. Larry Ebert</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 8 Tapoan Road		<b>Transaction ID: PR1090232817625</b>		
City State Zip Code Richmond VA 23226	Amount of Each Receipt this Period _____ 750.00		P/R Deduction (\$125.00 Se- mi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b> _____		_____		
Name of Employer Occupation AS - Org Effectiveness Managing VP, Corp Real Estate	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ 2250.00			

Full Name (Last, First, Middle Initial) <b>C. Michael Zamsky</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 1350 Beverly Road #1204		<b>Transaction ID: PR1090233017625</b>		
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period _____ 750.00		P/R Deduction (\$125.00 Se- mi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b> _____		_____		
Name of Employer Occupation RM - Chief of Staff Chief Consumer Credit Officer	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ 2250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>2250.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Kent Ivanoff		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1090233217625	
Mailing Address 5605 Hunter's Glen Drive		Amount of Each Receipt this Period 1416.66	
City State Zip Code Glen Allen VA 23059	FEC ID number of contributing federal political committee. C		
Name of Employer Mainstreet Management	Occupation EVP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4249.98		
P/R Deduction (\$208.33 Semi-Monthly)			

Full Name (Last, First, Middle Initial) <b>B.</b> James Reo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1090233317625	
Mailing Address 3141 N Pollard St		Amount of Each Receipt this Period 270.00	
City State Zip Code Arlington VA 22207	FEC ID number of contributing federal political committee. C		
Name of Employer Executive & Campus Recruiting	Occupation VP, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00		
P/R Deduction (\$45.00 Semi-Monthly)			

Full Name (Last, First, Middle Initial) <b>C.</b> Charles Clark		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1091968517625	
Mailing Address 3023 Macomb St NW		Amount of Each Receipt this Period 375.00	
City State Zip Code Washington DC 20008	FEC ID number of contributing federal political committee. C		
Name of Employer Litigation Group	Occupation Managing VP, Chief Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00		
P/R Deduction (\$62.50 Semi-Monthly)			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2061.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Sivakumar Gowrishankar		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1091968617625
Mailing Address 10006 Stonemill Rd		Amount of Each Receipt this Period 375.00
City Richmond State VA Zip Code 23233	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Upmarket Acquisition Occupation VP, Business Analysis	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Robert Turner		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1091968717625
Mailing Address 2107 Mount Blanco Rd		Amount of Each Receipt this Period 252.00
City Chester State VA Zip Code 23836	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$42.00 Semi-Monthly)
Name of Employer ETO Administration Occupation SVP, Information Technology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 756.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Troy Jamison		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1096508417625
Mailing Address 11713 Shadow Run Lane		Amount of Each Receipt this Period 210.00
City Glen Allen State VA Zip Code 23059	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$35.00 Semi-Monthly)
Name of Employer Mainstreet Customer Acquisition Occupation VP, Business Analysis	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 630.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	837.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mark Becker</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1096508517625
Mailing Address 4712 Hearthstone		Amount of Each Receipt this Period 150.00
City State Zip Code Glen Allen VA 23059	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Client Support - Card Mgmt	Occupation Sr. Dir., HR Client Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Douglas Wall</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1096508817625
Mailing Address 2511 Northwind Place		Amount of Each Receipt this Period 600.00
City State Zip Code Richmond VA 23233	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer Compliance - Central Services	Occupation VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

Full Name (Last, First, Middle Initial) <b>C. Victoria Mirandah</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1103674817625
Mailing Address 11600 Aprilbud Drive		Amount of Each Receipt this Period 199.98
City State Zip Code Richmond VA 23233	FEC ID number of contributing federal political committee. C	P/R Deduction (\$33.33 Semi-Monthly)
Name of Employer Diversity	Occupation Director, HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.94	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	949.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Richard Abel</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3 Ramapo Trail		<b>Transaction ID: PR1113895417625</b>	
City Somerville	State NJ	Zip Code 08876	Amount of Each Receipt this Period _____ 187.50
FEC ID number of contributing federal political committee. C _____			
Name of Employer Auto Finance - NorthEast Div.	Occupation Director, Divisional Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 562.50		
		P/R Deduction (\$31.25 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Elisabeth Bresee</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 910 Peacock Station Road		<b>Transaction ID: PR1119162917625</b>	
City McLean	State VA	Zip Code 22102	Amount of Each Receipt this Period _____ 187.50
FEC ID number of contributing federal political committee. C _____			
Name of Employer Policy Affairs	Occupation VP, Sr. Associate Genl Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 562.50		
		P/R Deduction (\$31.25 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. Leonard Roseman</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3314 Grove Ave		<b>Transaction ID: PR1119163017625</b>	
City Richmond	State VA	Zip Code 23221-2818	Amount of Each Receipt this Period _____ 375.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer CRM - IBS Transformation	Occupation VP, Statistical Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1125.00		
		P/R Deduction (\$62.50 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Colin Ruh Mailing Address 5044 Silver Lake Drive City State Zip Code Plano TX 75093 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1121981117625 Amount of Each Receipt this Period 375.00 P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Occupation COAF - Fin & Acctg SVP, Finance Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1125.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Todd Kennedy Mailing Address 660 Washington St Apt 8H City State Zip Code Boston MA 02111 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1125784017625 Amount of Each Receipt this Period 437.52 P/R Deduction (\$72.92 Semi-Monthly)
Name of Employer Occupation COHF General & Admin Managing VP, Business Analysis Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1312.56		

<b>C.</b> Full Name (Last, First, Middle Initial) Marsha King Mailing Address 8600 Garnet Rock Gate City State Zip Code Laurel MD 20723 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1133064417625 Amount of Each Receipt this Period 375.00 P/R Deduction (\$-1125.00 Semi-Monthly)
Name of Employer Occupation Client Support - Staff Fns Managing VP, HR Client Cnsltng Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1125.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1187.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Amy Baumgardner</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2935 Tennyson Street NW		<b>Transaction ID: PR1137262517625</b>
City Washington State DC Zip Code 20015	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 630.00
Name of Employer CRG - Restructuring	Occupation VP, Sr. Associate Genl Counsel	P/R Deduction (\$105.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1505.00	

Full Name (Last, First, Middle Initial) <b>B. Joel Martinez</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5248 Scotsglen Dr		<b>Transaction ID: PR1143077717625</b>
City Glen Allen State VA Zip Code 23059	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00
Name of Employer Client Support - GFS	Occupation VP, HR Client Consulting	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Polly Nyquist</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3018 O Street, N.W.		<b>Transaction ID: PR1143077817625</b>
City Washington State DC Zip Code 20007	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer Strategic Support	Occupation Managing VP, Chief Counsel	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1080.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Raymond Frigo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1143078017625	
Mailing Address 2711 Remington Road		Amount of Each Receipt this Period 252.00	
City Oakton	State VA	Zip Code 22124	P/R Deduction (\$42.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 756.00	
Name of Employer UK Operations Mgmt	Occupation SVP, Information Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Michael Dobbins		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1143078117625	
Mailing Address 6203 Bristol Place		Amount of Each Receipt this Period 750.00	
City Frisco	State TX	Zip Code 75034	P/R Deduction (\$125.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 2250.00	
Name of Employer Retail Banking Integration	Occupation SVP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) John Meadows		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1188379617625	
Mailing Address 4306 Stevens Battle Lane		Amount of Each Receipt this Period 319.98	
City Fairfax	State VA	Zip Code 22033	P/R Deduction (\$53.33 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 959.94	
Name of Employer Executive & Campus Recruiting	Occupation Director, Recruiting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1321.98
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Tim Benson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1196776917625
Mailing Address 7009 Mills Branch Circle		Amount of Each Receipt this Period 126.00
City State Zip Code Plano TX 75024	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Occupation Architecture VP, Information Technology	Aggregate Year-to-Date ▼ 378.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$21.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> Eric Bucci		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1206210617625
Mailing Address 11901 Kingsbury Court		Amount of Each Receipt this Period 87.54
City State Zip Code Richmond VA 23233	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Occupation Business Innovation Manager, Project Management	Aggregate Year-to-Date ▼ 262.62	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$14.59 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Lance Melber		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1210550417625
Mailing Address 4901 W 144th Terrace		Amount of Each Receipt this Period 750.00
City State Zip Code Leawood KS 66224	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Occupation Home Loans - KC Operations SVP, Business Analysis	Aggregate Year-to-Date ▼ 2250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$125.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	963.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Jane Stafford		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5237 Chappell Ridge Place		Transaction ID: PR1212903917625	
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Audit - Compliance	Occupation VP, Audit		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	P/R Deduction (\$62.50 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> Paula Wimbush		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 11419 N. Wedgemont Drive		Transaction ID: PR1212904017625	
City State Zip Code Richmond VA 23236	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Corporate Governance	Occupation Sr. Communications Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Brent Sower		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5606 Arbor Point Terrace		Transaction ID: PR1225497917625	
City State Zip Code Chester VA 23831	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Capital One	Occupation Brand Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Harvey Gantz Mailing Address 2944 Gracefield Rd City Silver Spring State MD Zip Code 20904 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1227249917625 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Corporate Citizenship Occupation Sr. Mgr, CRA DA & Reporting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Wayne Lutz Mailing Address 10988 Elmont Woods Drive City Glen Allen State VA Zip Code 23059 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1234013417625 Amount of Each Receipt this Period 90.00 P/R Deduction (\$15.00 Semi-Monthly)
Name of Employer Data Center Service Mgmt Occupation IT Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		

<b>C.</b> Full Name (Last, First, Middle Initial) John Ansted Mailing Address 11507 Longview Landing Dr City Richmond State VA Zip Code 23233 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1250246017625 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Client Support - Banking Occupation VP, HR Client Consulting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>390.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Frank Eck Mailing Address 47327 Sterdley Falls Terrace City State Zip Code Sterling VA 20165 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1250246117625 Amount of Each Receipt this Period 126.00 P/R Deduction (\$21.00 Semi-Monthly)
Name of Employer Occupation Legal & Regulatory Advisory Director, Asst General Counsel Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 273.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Steven Thibodeau Mailing Address 2228 Meadow Drive City State Zip Code Carrollton TX 75007 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1250246217625 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Occupation Plano- Indirect Admin Managing VP, Business Analysis Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 325.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Peter Horst Mailing Address 1439 Oakview Drive City State Zip Code McLean VA 22101 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1250246317625 Amount of Each Receipt this Period 180.00 P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Occupation Brand GFS Strategy Managing VP, Brand Management Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 390.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>456.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Albert Knotts		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 205 W. Mason Avenue		<b>Transaction ID:</b> PR1255140317625
City Alexandria	State VA	Zip Code 22301
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 510.00
Name of Employer Chief Auditor	Occupation SVP, Chief Auditor	P/R Deduction (\$85.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Nancy Ferguson		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4108 Veneto Dr		<b>Transaction ID:</b> PR1259121017625
City Frisco	State TX	Zip Code 75034
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 529.50
Name of Employer COAF legal	Occupation VP, Chief Counsel	P/R Deduction (\$88.25 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 970.75	

Full Name (Last, First, Middle Initial) <b>C.</b> Jerry Fiala		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6100 Olde Hartley Place		<b>Transaction ID:</b> PR1268504017625
City Glen Allen	State VA	Zip Code 23060
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 750.00
Name of Employer CAC Horizontal Support	Occupation Managing VP, Operations	P/R Deduction (\$125.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1789.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. ROBERT STUART</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1281976417625
Mailing Address 1941 COUNTRY CLUB DR		Amount of Each Receipt this Period 337.02
City State Zip Code BATON ROUGE LA 70808	FEC ID number of contributing federal political committee. C	P/R Deduction (\$56.17 Semi-Monthly)
Name of Employer CHIEF COMM L BNKG EXECUTIVE	Occupation CHIEF COMMERCIAL BANKING EXEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.02	

Full Name (Last, First, Middle Initial) <b>B. Christopher Curtis</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414959517625
Mailing Address 6017 Madawaska Road		Amount of Each Receipt this Period 258.32
City State Zip Code Bethesda MD 20816	FEC ID number of contributing federal political committee. C	P/R Deduction (\$33.33 Semi-Monthly)
Name of Employer Policy Affairs	Occupation Sr Director, Assoc Gen. Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.32	

Full Name (Last, First, Middle Initial) <b>C. Frank LaPrade</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414959917625
Mailing Address 6440 Wiscasset Road		Amount of Each Receipt this Period 750.00
City State Zip Code Bethesda MD 20816	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Senior Management	Occupation EVP, Chief of Staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1345.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Frank Borchert		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414960017625
Mailing Address 9813 Thunderhill Ct		Amount of Each Receipt this Period 1248.00
City State Zip Code Great Falls VA 22066	FEC ID number of contributing federal political committee. C	P/R Deduction (\$208.00 Semi-Monthly)
Name of Employer Legal Management	Occupation EVP, Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00	

Full Name (Last, First, Middle Initial) <b>B.</b> David Tyler		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414960317625
Mailing Address 5097 Little Falls Road		Amount of Each Receipt this Period 1249.98
City State Zip Code Arlington VA 22207	FEC ID number of contributing federal political committee. C	P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer Integration	Occupation Managing VP, Project Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3749.94	

Full Name (Last, First, Middle Initial) <b>C.</b> Kenneth Cirillo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414962217625
Mailing Address 418 Weston Way		Amount of Each Receipt this Period 150.00
City State Zip Code Richmond VA 23238	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Executive Coaching	Occupation VP, Executive Coach	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2647.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Murray Abrams</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10208 Bencross Dr		<b>Transaction ID: PR414962517625</b>	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period _____ 900.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer US Corp Dev Transactions Group	Occupation EVP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2700.00		P/R Deduction (\$150.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Douglas Pick</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 11720 Paddock Drive Apt. 103-2		<b>Transaction ID: PR414962617625</b>	
City State Zip Code Midlothian VA 23113	Amount of Each Receipt this Period _____ 375.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer US Card TOH Adjustments	Occupation VP, Project Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1125.00		P/R Deduction (\$62.50 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Kenneth Aversa</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3708 Ivory Terrace		<b>Transaction ID: PR414962717625</b>	
City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period _____ 192.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Customer Solutions Admin	Occupation Managing VP, Enterprise Rsk Mgt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 576.00		P/R Deduction (\$32.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1467.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Roberta Douma Mailing Address 305 Westham Parkway City Richmond State VA Zip Code 23229 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414962917625 Amount of Each Receipt this Period 498.00 P/R Deduction (\$83.00 Semi-Monthly)
Name of Employer Executive Coaching Occupation VP, Executive Coach Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1494.00		

<b>B.</b> Full Name (Last, First, Middle Initial) William Andrews Mailing Address 8914 Tolman Rd City Richmond State VA Zip Code 23229 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414963017625 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Bank Retail Integration Occupation Managing VP, Ops Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Eric Nelson Mailing Address 100 Berkshire Road City Richmond State VA Zip Code 23221 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414963317625 Amount of Each Receipt this Period 180.00 P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer CMC Support Occupation Managing VP, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>828.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Cathryne Doss</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414963817625
Mailing Address 9024 Pamunkey River Farms Dr City State Zip Code Mechanicsville VA 23111		Amount of Each Receipt this Period 957.48
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$159.58 Se-mi-Monthly)
Name of Employer Cardholder Enhancements - IT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Managing VP, IT Data Management Aggregate Year-to-Date ▼ 2872.44	

Full Name (Last, First, Middle Initial) <b>B. William McDonald</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR414964317625
Mailing Address 8019 Greenwich Woods Dr City State Zip Code McLean VA 22102		Amount of Each Receipt this Period 1249.98
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$208.33 Se-mi-Monthly)
Name of Employer Senior Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation EVP, Brand Aggregate Year-to-Date ▼ 3749.94	

Full Name (Last, First, Middle Initial) <b>C. Stephen Linehan</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415000217625
Mailing Address 5701 Little Spring City State Zip Code Derwood MD 20855		Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$100.00 Se-mi-Monthly)
Name of Employer Treasury Administration Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation EVP, Treasurer Aggregate Year-to-Date ▼ 1800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2807.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Richard Silverthorne</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415010217625
Mailing Address 10404 Towlston Rd		Amount of Each Receipt this Period 300.00
City State Zip Code Fairfax VA 22030	FEC ID number of contributing federal political committee. C	P/R Deduction (\$-50.00 Se-mi-Monthly)
Name of Employer Capital One	Occupation Director, Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Jory Berson</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415012517625
Mailing Address 338 Perrow Lane		Amount of Each Receipt this Period 450.00
City State Zip Code Manakin-Sabot VA 23103	FEC ID number of contributing federal political committee. C	P/R Deduction (\$208.00 Se-mi-Monthly)
Name of Employer Senior Management	Occupation President, US Card	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) <b>C. Peter Schnall</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415012617625
Mailing Address 6703 Moly Drive		Amount of Each Receipt this Period 1249.98
City State Zip Code Falls Church VA 22046	FEC ID number of contributing federal political committee. C	P/R Deduction (\$208.33 Se-mi-Monthly)
Name of Employer Senior Management	Occupation Chief Risk Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3749.94	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1999.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Massey Mailing Address 901 Kingham Drive City Midlothian State VA Zip Code 23114 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR415032217625 Amount of Each Receipt this Period 250.02 P/R Deduction (\$41.67 Semi-Monthly)
Name of Employer Capital One Occupation Director, HR Client Consulting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	

<b>B.</b> Full Name (Last, First, Middle Initial) Jeffrey Heslop Mailing Address 8401 W. Hildy Ct. City Spotsylvania State VA Zip Code 22553 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR415088417625 Amount of Each Receipt this Period 390.00 P/R Deduction (\$65.00 Semi-Monthly)
Name of Employer ITRO Occupation Managing VP, IT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Friedman Mailing Address 3702 Holland Avenue #2 City Dallas State TX Zip Code 75219 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR415114417625 Amount of Each Receipt this Period 750.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Dealer M&A Occupation SVP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1390.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Alexander Mailing Address 9925 Eildonway Pl. City Richmond State VA Zip Code 23238 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR415154317625 Amount of Each Receipt this Period 750.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer: ECM General Management Occupation: EVP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2125.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Kathy Collier Mailing Address 16118 Mabry Mill Drive City Midlothian State VA Zip Code 23113 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR415561617625 Amount of Each Receipt this Period 300.00 P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer: UFO Support- Admin Occupation: Managing VP, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 592.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Mortensen Mailing Address 9515 Carterwood Ct City Richmond State VA Zip Code 23229 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR415695617625 Amount of Each Receipt this Period 750.00 P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer: AS - Org Effectiveness Occupation: SVP, Facilities Mgt/Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) David Wasik		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415707617625	
Mailing Address 3817 Houndstooth Court		Amount of Each Receipt this Period 750.00	
City Richmond	State VA	Zip Code 23233	P/R Deduction (\$125.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Small Business	
Occupation SVP, Business Analysis		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2250.00			

B. Full Name (Last, First, Middle Initial) Eric Schweikert		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415720917625	
Mailing Address 2352 N Vernon St		Amount of Each Receipt this Period 252.00	
City Arlington	State VA	Zip Code 22207	P/R Deduction (\$42.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer SF-Strategic Finance	
Occupation Managing VP, Business Analysis		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 756.00			

C. Full Name (Last, First, Middle Initial) Robert Bremer		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR415873817625	
Mailing Address 6004 Glen Abbey Dr.		Amount of Each Receipt this Period 150.00	
City Glen Allen	State VA	Zip Code 23059	P/R Deduction (\$25.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Customer Mgmt IT	
Occupation VP, Information Technology		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 425.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1152.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	







# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Walter Moran Mailing Address 12905 Church Rd City Richmond State VA Zip Code 23233 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR416110517625 Amount of Each Receipt this Period 240.00 P/R Deduction (\$40.00 Semi-Monthly)
Name of Employer GFS IT Leadership Occupation VP, Information Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 570.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Larry Klane Mailing Address 3018 O Street NW City Washington State DC Zip Code 20007 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR416110917625 Amount of Each Receipt this Period 1249.98 P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer Senior Management Occupation President, Global Fin Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3749.94		

<b>C.</b> Full Name (Last, First, Middle Initial) Andres Navarrete Mailing Address 5613 Wood Way City Bethesda State MD Zip Code 20816 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR416111017625 Amount of Each Receipt this Period 409.20 P/R Deduction (\$68.20 Semi-Monthly)
Name of Employer Legal & Regulatory Advisory Occupation Managing VP, Chief Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1227.60		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1899.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Laura Olle		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR591247317625	
Mailing Address 4200 Military Road NW		Amount of Each Receipt this Period 1249.98	
City Washington      State DC      Zip Code 20015	FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer Enterprise Risk Management      Occupation EVP, Enterprise Risk Management	Aggregate Year-to-Date ▼ 3749.94		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Douglas Krey		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR591247417625	
Mailing Address 2032 Monument Ave		Amount of Each Receipt this Period 750.00	
City Richmond      State VA      Zip Code 23220	FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Shared Services & Risk Mgmt      Occupation SVP, Human Resources	Aggregate Year-to-Date ▼ 2250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Jerry Miller		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR591247517625	
Mailing Address 3020 Darnley Drive		Amount of Each Receipt this Period 210.00	
City Richmond      State VA      Zip Code 23235	FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$35.00 Semi-Monthly)
Name of Employer Sourcing, Contracting & Ins      Occupation Sr. Manager, Procurement	Aggregate Year-to-Date ▼ 630.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2209.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Terren Peterson		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3712 Sovereign Lane		<b>Transaction ID:</b> PR591247717625
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 252.00
Name of Employer Enter App Platforms	Occupation Director, Data Management	P/R Deduction (\$42.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Gregor Bailar		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6653 Sorrel St		<b>Transaction ID:</b> PR591247917625
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1249.98
Name of Employer Senior Management	Occupation Chief Information Officer	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3749.94	

Full Name (Last, First, Middle Initial) <b>C.</b> Darrell S. Alexander		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 9008 Rio Grande Rd.		<b>Transaction ID:</b> PR591478617625
City Richmond	State VA	Zip Code 23229
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 187.50
Name of Employer Capital One	Occupation VP, Finance	P/R Deduction (\$31.25 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1689.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Degenhardt		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR593398417625	
Mailing Address 9207 Hartley Hill Ct		Amount of Each Receipt this Period 174.00	
City Glen Allen	State VA	Zip Code 23060	P/R Deduction (\$29.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 522.00	
Name of Employer CMC - Channels and Fulfillment	Occupation Sr Manager, Process Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>B.</b> Full Name (Last, First, Middle Initial) Raymond Peloso		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR613997017625	
Mailing Address 12305 Reed Forest Ct		Amount of Each Receipt this Period 300.00	
City Glen Allen	State VA	Zip Code 23059	P/R Deduction (\$50.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 900.00	
Name of Employer Collections Baseline Strategy	Occupation VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>C.</b> Full Name (Last, First, Middle Initial) Franklin Thacker		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR624261817625	
Mailing Address 306 Sunset Dr		Amount of Each Receipt this Period 120.00	
City Richmond	State VA	Zip Code 23229	P/R Deduction (\$20.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 360.00	
Name of Employer Controller's Mgmt & Admin	Occupation SVP, Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	594.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Carlos Palomares</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 102-25 Coral Creek Rd		<b>Transaction ID: PR682519617625</b>	
City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period _____ 1249.98		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Occupation GFS Management SVP, Business Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3749.94	P/R Deduction (\$208.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Patrick Gray</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2406 Brushcreek Drive		<b>Transaction ID: PR682519717625</b>	
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period _____ 375.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Occupation COAF - Fin & Acctg VP, Finance			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1125.00	P/R Deduction (\$62.50 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. Kevin Murray</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6003 Woodley Rd.		<b>Transaction ID: PR682519817625</b>	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Occupation Regulatory Exams SVP, Business Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00	P/R Deduction (\$50.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1924.98</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ellen Falbo Mailing Address 3818 24th st. N City Arlington State VA Zip Code 22207 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR694166717625 Amount of Each Receipt this Period 375.00 P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer CRM - Card Occupation VP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 995.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Larry Rodriguez Mailing Address 2600 Jim Johnson Rd. City Concord State NC Zip Code 28027 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR694166917625 Amount of Each Receipt this Period 210.00 P/R Deduction (\$35.00 Semi-Monthly)
Name of Employer Auto Finance - Sales Admin Occupation Managing VP, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 630.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Poole Mailing Address 4503 Orr Drive City Chantilly State VA Zip Code 20151 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR740892817625 Amount of Each Receipt this Period 186.00 P/R Deduction (\$31.00 Semi-Monthly)
Name of Employer Up Market Account Mgmt Occupation Managing VP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>771.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Walker Mailing Address 323 Clovelly Rd City Richmond State VA Zip Code 23221 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR740892917625 Amount of Each Receipt this Period 450.00 P/R Deduction (\$75.00 Semi-Monthly)
Name of Employer Mainstreet Customer Management Occupation VP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1350.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Susan Tedesco Mailing Address 9000 River Trace Ct City Richmond State VA Zip Code 23229 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR766884117625 Amount of Each Receipt this Period 120.00 P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer SB Admin Occupation VP, Business Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Alan McCleaf Mailing Address 704 Sleepy Hollow Road City Richmond State VA Zip Code 23229 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR852363717625 Amount of Each Receipt this Period 90.00 P/R Deduction (\$15.00 Semi-Monthly)
Name of Employer Rewards Program Management Occupation Manager, Project Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>660.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Paul Chemmanoor		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4824 Saddleridge Court		Transaction ID: PR852363817625	
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$25.00 Semi-Monthly)	
Name of Employer ECM Internet IT	Occupation Director, Master Appl Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kyle Shidler		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 6413 Rockbluff Cir.		Transaction ID: PR852363917625	
City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$125.00 Semi-Monthly)	
Name of Employer Plano - Corporate	Occupation SVP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> James Evans		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 105 N. Erlwood Court		Transaction ID: PR852364317625	
City State Zip Code Richmond VA 23229	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$100.00 Semi-Monthly)	
Name of Employer Customer Care Admin	Occupation Managing VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Thomas Houston</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 171 N. Maple Ave		<b>Transaction ID: PR861906217625</b>	
City State Zip Code Greenwich CT 06830	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer US Card Chief Of Staff	Occupation Managing VP, Project Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2250.00		P/R Deduction (\$125.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Douglas Huang</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 46784 Hollow Mountain Pl		<b>Transaction ID: PR907270117625</b>	
City State Zip Code Sterling VA 20164	Amount of Each Receipt this Period _____ 90.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Upmarket Acquisition	Occupation Sr Statistical Analysis Managr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 270.00		P/R Deduction (\$15.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Karl Werwath</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13007 River Road		<b>Transaction ID: PR937267617625</b>	
City State Zip Code Richmond VA 23238	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Card Ops Admin	Occupation SVP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2250.00		P/R Deduction (\$125.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1590.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Marc T. Solomon		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR939692517625
Mailing Address 2124 21st Road N		Amount of Each Receipt this Period 534.00
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer Upmarket Acquisition	Occupation VP, Business Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 898.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John Polk		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR941791917625
Mailing Address 11709 Aprilbud Dr		Amount of Each Receipt this Period 252.00
City Richmond	State VA	Zip Code 23233
FEC ID number of contributing federal political committee. C		P/R Deduction (\$42.00 Semi-Monthly)
Name of Employer CMC Ops Analysis and Proj Mgmt	Occupation Director, Operations Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Robert Armour		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR945153117625
Mailing Address 21 Brookside Farm Ln.		Amount of Each Receipt this Period 375.00
City Sudbury	State MA	Zip Code 01776
FEC ID number of contributing federal political committee. C		P/R Deduction (\$62.50 Semi-Monthly)
Name of Employer COHF IT	Occupation VP, Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1161.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Samir Deshpande</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10513 Tyler Terrace		<b>Transaction ID: PR945153217625</b>	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Dealer M&A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SVP, Business Analysis Aggregate Year-to-Date ▼ _____ 2250.00	P/R Deduction (\$125.00 Se-mi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Frederick Knowles</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6304 Avalon Dr		<b>Transaction ID: PR945153517625</b>	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer HR Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SVP, HR Client Consulting Aggregate Year-to-Date ▼ _____ 2250.00	P/R Deduction (\$125.00 Se-mi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. Curtis Garrett</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9311 Squirrel Tree Court		<b>Transaction ID: PR945153617625</b>	
City State Zip Code Chesterfield VA 23838	Amount of Each Receipt this Period _____ 187.50		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Decision Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP, Information Technology Aggregate Year-to-Date ▼ _____ 562.50	P/R Deduction (\$31.25 Sem-i-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1687.50</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 82
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Peter Deoudes</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 300 Autumn Wind Way		<b>Transaction ID: PR947256417625</b>	
City State Zip Code Rockville MD 20850	Amount of Each Receipt this Period _____ 375.00		
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$62.50 Semi-Monthly)	
Name of Employer Regulatory Exams	Occupation VP, Finance	Aggregate Year-to-Date ▼ _____ 1125.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Joseph Morgan</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 703 Big Woods Place		<b>Transaction ID: PR947256617625</b>	
City State Zip Code Mankin Sabot VA 23103	Amount of Each Receipt this Period _____ 375.00		
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$62.50 Semi-Monthly)	
Name of Employer Helix Operations	Occupation VP, Information Technology	Aggregate Year-to-Date ▼ _____ 1125.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Wylie Schwieder</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5905 Brookmeade Terrace		<b>Transaction ID: PR949575617625</b>	
City State Zip Code Glen Allen VA 23059	Amount of Each Receipt this Period _____ 125.00		
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$0.00 Semi-Monthly)	
Name of Employer Capital One	Occupation SVP, Operations	Aggregate Year-to-Date ▼ _____ 875.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>875.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. William Cilluffo</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR952992917625	
Mailing Address 155 Alexandra Blvd		Amount of Each Receipt this Period 750.00	
City Toronto	State ON	Zip Code M4R 1-M3	P/R Deduction (\$125.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 2250.00	
Name of Employer Canada Senior Mgmt	Occupation SVP, Business Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Barry Beswick</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR956833117625	
Mailing Address 557 Woodson Court		Amount of Each Receipt this Period 375.00	
City Manakin-Sabot	State VA	Zip Code 23103	P/R Deduction (\$62.50 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 1125.00	
Name of Employer WC - Banking	Occupation VP, Corporate Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Timothy McGough</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR966702317625	
Mailing Address 3510 Broadrun Dr		Amount of Each Receipt this Period 240.00	
City Fairfax	State VA	Zip Code 22033	P/R Deduction (\$40.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 965.00	
Name of Employer Client Support - Finance	Occupation VP, HR Client Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1365.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	86797.48

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends Of Joe Baca</b>		<b>Transaction ID: 13008383</b> Date of Disbursement
Mailing Address 555 Capitol Mall Suite 1425		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Rep. Joseph Baca		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 43	

Full Name (Last, First, Middle Initial) <b>B. Bachmann For Congress</b>		<b>Transaction ID: 12789090</b> Date of Disbursement
Mailing Address Box 49756		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Blaine	State MN	Zip Code 55449
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Michele Bachmann		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 6	

Full Name (Last, First, Middle Initial) <b>C. Bachmann For Congress</b>		<b>Transaction ID: 13008275</b> Date of Disbursement
Mailing Address Box 49756		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Blaine	State MN	Zip Code 55449
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Michele Bachmann		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 6	

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Bachus For Congress</b>		<b>Transaction ID:</b> 12995514	
Mailing Address Po Box 59444		Date of Disbursement 09 / 15 / 2006	
City Birmingham	State AL	Zip Code 35259	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/Type	
Candidate Name Rep. Spencer Bachus			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AL	District: 6		

Full Name (Last, First, Middle Initial) <b>B. Back America's Conservatives</b>		<b>Transaction ID:</b> 12978447	
Mailing Address 1251 Dartmouth Court		Date of Disbursement 09 / 12 / 2006	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement		011 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Baker For Congress Committee</b>		<b>Transaction ID:</b> 12978441	
Mailing Address 9132 Highland Garden Road		Date of Disbursement 09 / 12 / 2006	
City Baton Rouge	State LA	Zip Code 70811	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/Type	
Candidate Name Rep. Richard H. Baker			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: LA	District: 6		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Baker For Congress Committee</b>		<b>Transaction ID:</b> 12978442 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 9132 Highland Garden Road		Amount of Each Disbursement this Period 5000.00
City Baton Rouge State LA Zip Code 70811	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Richard H. Baker		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Barrett For Congress</b>		<b>Transaction ID:</b> 13008274 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address P.O. Box 869		Amount of Each Disbursement this Period 1000.00
City Westminster State SC Zip Code 29693	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. J. Gresham Barrett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bass Victory Committee</b>		<b>Transaction ID:</b> 12798405 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address PO Box 3451 PO Box 3451		Amount of Each Disbursement this Period 1000.00
City Concord State NH Zip Code 03302	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Charles F. Bass		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Judy Biggert For Congress</b>		<b>Transaction ID:</b> 12996915 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 637		Amount of Each Disbursement this Period 1000.00
City Hinsdale State IL Zip Code 60522	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Judy Biggert		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of John Boehner</b>		<b>Transaction ID:</b> 12789091 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 6
Mailing Address 7908-I Cincinnati Dayton Road		Amount of Each Disbursement this Period 1500.00
City West Chester State OH Zip Code 45069	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. John A. Boehner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Boucher for Congress</b>		<b>Transaction ID:</b> 13008609 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 188 East Main Street		Amount of Each Disbursement this Period 4000.00
City Abingdon State VA Zip Code 24210	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Rick Boucher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Michael Burgess For Congress</b>		<b>Transaction ID: 13129261</b>	
Mailing Address P.O. Box 2334		Date of Disbursement 09 / 28 / 2006	
City Denton	State TX	Zip Code 76202	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Michael Burgess			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TX	District: 26		

Full Name (Last, First, Middle Initial) <b>B. CAPITO FOR CONGRESS</b>		<b>Transaction ID: 12996922</b>	
Mailing Address P.O. Box 11519		Date of Disbursement 09 / 15 / 2006	
City Charleston	State WV	Zip Code 25339	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Shelley Moore Capito			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WV	District: 2		

Full Name (Last, First, Middle Initial) <b>C. Friends Of Lois Capps</b>		<b>Transaction ID: 13129278</b>	
Mailing Address PO Box 23940		Date of Disbursement 09 / 28 / 2006	
City Santa Barbara	State CA	Zip Code 93121	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Lois Capps			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 23		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Capuano For Congress Committee</b>		<b>Transaction ID:</b> 13129270 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address PO Box 440305		Amount of Each Disbursement this Period 1000.00
City Somerville State MA Zip Code 02144	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Michael E. Capuano		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mike Dewine For Us Senate</b>		<b>Transaction ID:</b> 12789095 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 6
Mailing Address PO Box 340188		Amount of Each Disbursement this Period 2000.00
City Columbus State OH Zip Code 43234	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Mike DeWine		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. John D. Dingell For Congress Committee</b>		<b>Transaction ID:</b> 13008311 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 607 14th Street N.W. Suite 800		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20005	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. John Dingell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Thelma Drake For Congress</b>		<b>Transaction ID:</b> 13008278 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address PO Box 61480		Amount of Each Disbursement this Period 1000.00
City Virginia Beach	State VA Zip Code 23466	
Purpose of Disbursement		
Candidate Name Ms. Thelma Drake Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 2		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		011 Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Dreier For Congress Committee</b>		<b>Transaction ID:</b> 12996925 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P O Box 1110		Amount of Each Disbursement this Period 1000.00
City Covina	State CA Zip Code 91722	
Purpose of Disbursement		
Candidate Name Rep. David Dreier Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 28		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		011 Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Dreier For Congress Committee</b>		<b>Transaction ID:</b> 13128857 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P O Box 1110		Amount of Each Disbursement this Period 4000.00
City Covina	State CA Zip Code 91722	
Purpose of Disbursement		
Candidate Name Rep. David Dreier Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 28		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Ensign For Senate</b>		<b>Transaction ID:</b> 12798597 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address 8917 Stafford Springs Drive		Amount of Each Disbursement this Period 1000.00
City Las Vegas State NV Zip Code 89134	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. John E. Ensign		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Anna Eshoo For Congress</b>		<b>Transaction ID:</b> 13129305 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 3000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Anna G. Eshoo		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tom Feeney For Congress</b>		<b>Transaction ID:</b> 12789094 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 6
Mailing Address 1420 Alafaya Trail #103		Amount of Each Disbursement this Period 1000.00
City Oviedo State FL Zip Code 32765	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Tom Feeney		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends Of Mike Ferguson</b>		<b>Transaction ID:</b> 13129266
Mailing Address 16 Mount Bethel Road Suite 353		Date of Disbursement 09 / 28 / 2006
City Warren	State NJ	Zip Code 07059
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Mike Ferguson		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 7	

Full Name (Last, First, Middle Initial) <b>B. Committee To Re-Elect Vito Fossella</b>		<b>Transaction ID:</b> 12971528
Mailing Address PO Box 131403		Date of Disbursement 09 / 08 / 2006
City Staten Island	State NY	Zip Code 10313
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Vito J. Fossella		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 13	

Full Name (Last, First, Middle Initial) <b>C. Barney Frank For Congress Committee</b>		<b>Transaction ID:</b> 13128336
Mailing Address P O Box 260		Date of Disbursement 09 / 28 / 2006
City Newtonville	State MA	Zip Code 02460
Purpose of Disbursement		Amount of Each Disbursement this Period 5000.00
Candidate Name Rep. Barney Frank		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 4	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Citizens For Gillmor</b>		<b>Transaction ID:</b> 13008407 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6	
Mailing Address P.O. Box 150		Amount of Each Disbursement this Period 1000.00	
City State Zip Code Old Fort OH 44861	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Paul E. Gillmor			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 5			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. GOODE FOR CONGRESS</b>		<b>Transaction ID:</b> 12771696 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6	
Mailing Address 115 ORCHARD AVE		Amount of Each Disbursement this Period 1000.00	
City State Zip Code ROCKY MOUNT VA 24151	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Virgil H. Goode, Jr.			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 5			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Bob Goodlatte For Congress Committee</b>		<b>Transaction ID:</b> 13129298 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address P.O. Box 292		Amount of Each Disbursement this Period 2500.00	
City State Zip Code Roanoke VA 24002	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Robert W. Goodlatte			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 6			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Hall of Fame PAC</b>		<b>Transaction ID:</b> 12771695 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 616 E Street, NW Suite 802		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20004	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Hall For Congress Committee (Ralph Hall - Rockwall)</b>		<b>Transaction ID:</b> 13129289 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address Post Office Box 711		Amount of Each Disbursement this Period 1000.00
City Rockwall State TX Zip Code 75087	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Ralph Hall		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ruben Hinojosa For Congress</b>		<b>Transaction ID:</b> 13129280 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 502 North 11th Street		Amount of Each Disbursement this Period 2500.00
City Mcallen State TX Zip Code 78501	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Ruben Hinojosa		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Hooley For Congress</b>		<b>Transaction ID:</b> 12798353 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address PO Box 2050		Amount of Each Disbursement this Period 1000.00
City Salem State OR Zip Code 97308	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Darlene Hooley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Hooley For Congress</b>		<b>Transaction ID:</b> 13129285 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address PO Box 2050		Amount of Each Disbursement this Period 2000.00
City Salem State OR Zip Code 97308	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Darlene Hooley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Hoyer For Congress</b>		<b>Transaction ID:</b> 12971822 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 1500.00
City Clinton State MD Zip Code 20735	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Steny H. Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Hoyer For Congress</b>		Transaction ID: 12971995 Date of Disbursement 09 / 08 / 2006
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 5000.00
City Clinton State MD Zip Code 20735	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Steny H. Hoyer		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Bobby Jindal Inc</b>		Transaction ID: 12996875 Date of Disbursement 09 / 15 / 2006
Mailing Address PO Box 8628		Amount of Each Disbursement this Period 1000.00
City Metairie State LA Zip Code 70011	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. Bobby Jindal		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 0	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Walter Jones For Congress Committee (2006)</b>		Transaction ID: 12995689 Date of Disbursement 09 / 15 / 2006
Mailing Address PO Box 99667		Amount of Each Disbursement this Period 1000.00
City Raleigh State NC Zip Code 27624	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Walter B. Jones, Jr.		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Sue Kelly For Congress</b>		<b>Transaction ID: 13008653</b> Date of Disbursement 09 / 21 / 2006
Mailing Address 187 Jay Street		Amount of Each Disbursement this Period 1000.00
City Katonah	State NY	
Zip Code 10536		
Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Sue W. Kelly		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 19		

Full Name (Last, First, Middle Initial) <b>B. Mark Kennedy 06</b>		<b>Transaction ID: 12771694</b> Date of Disbursement 07 / 12 / 2006
Mailing Address PO Box 49333		Amount of Each Disbursement this Period 1000.00
City Blaine	State MN	
Zip Code 55449		
Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Mark Kennedy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 6		

Full Name (Last, First, Middle Initial) <b>C. Kyl for Senate</b>		<b>Transaction ID: 12789079</b> Date of Disbursement 07 / 21 / 2006
Mailing Address 2200 East Camelback Road Suite 120		Amount of Each Disbursement this Period 2000.00
City Phoenix	State AZ	
Zip Code 85016-8301		
Purpose of Disbursement 011 Category/ Type		
Candidate Name Sen. Jon Kyl		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 2		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Leadership PAC 2006</b>		Transaction ID: 12771701 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Joe Lieberman</b>		Transaction ID: 12823466 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 231294, State House Square		Amount of Each Disbursement this Period 1000.00
City Hartford State CT Zip Code 06123	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Joseph Lieberman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lucas For Congress</b>		Transaction ID: 13008649 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address Post Office Box 1726		Amount of Each Disbursement this Period 1000.00
City Oklahoma City State OK Zip Code 73101	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Frank D. Lucas		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Making Business Excel PAC</b>		<b>Transaction ID:</b> 12823468 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 3241		Amount of Each Disbursement this Period 5000.00
City Cheyenne State WY Zip Code 82003	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Donald A. Manzullo For Congress</b>		<b>Transaction ID:</b> 12798388 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address PO Box 7783		Amount of Each Disbursement this Period 1000.00
City Rockford State IL Zip Code 61126	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Donald A. Manzullo		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Matheson For Congress</b>		<b>Transaction ID:</b> 13008643 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 677 South 200 West Suite A		Amount of Each Disbursement this Period 1000.00
City Salt Lake City State UT Zip Code 84101	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. James D. Matheson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Mccaul For Congress Inc</b>		<b>Transaction ID: 12971527</b>	
Mailing Address 3508 Far West Blvd Ste 320		Date of Disbursement 09 / 08 / 2006	
City Austin	State TX	Zip Code 78731	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Mr. Michael McCaul			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TX	District: 10		

Full Name (Last, First, Middle Initial) <b>B. Mcconnell Senate Committee '08</b>		<b>Transaction ID: 12771699</b>	
Mailing Address PO Box 1496		Date of Disbursement 07 / 12 / 2006	
City Louisville	State KY	Zip Code 40201	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. Mitch McConnell			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY	District: 2		

Full Name (Last, First, Middle Initial) <b>C. Mcconnell Senate Committee '08</b>		<b>Transaction ID: 12771698</b>	
Mailing Address PO Box 1496		Date of Disbursement 07 / 17 / 2006	
City Louisville	State KY	Zip Code 40201	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. Mitch McConnell			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY	District: 2		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Committee To Elect Mchugh</b>		<b>Transaction ID:</b> 13129304 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 228 S. Washington St.		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22314	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. John M. McHugh		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends for Gregory Meeks</b>		<b>Transaction ID:</b> 13008652 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 219-10 South Conduit Avenue 219-10 South Conduit Avenue		Amount of Each Disbursement this Period 1500.00
City Springfield Garden State NY Zip Code 11413	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Gregory W. Meeks		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Charlie Melancon Campaign Committee Inc</b>		<b>Transaction ID:</b> 12971517 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 511 Congress St PO Box 549		Amount of Each Disbursement this Period 2500.00
City Napoleonville State LA Zip Code 70390	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Charles Melancon		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Menendez For Senate</b>		<b>Transaction ID:</b> 12995702 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1500.00
City Union City State NJ Zip Code 07087	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Robert Menendez		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Brad Miller For United States Congress</b>		<b>Transaction ID:</b> 12798346 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address Post Office Box 20307		Amount of Each Disbursement this Period 1000.00
City Raleigh State NC Zip Code 27619	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Brad Miller		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Moore for Congress Committee</b>		<b>Transaction ID:</b> 13129284 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 14631		Amount of Each Disbursement this Period 2000.00
City Shawnee Mission State KS Zip Code 66285	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Dennis Moore		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Moore For Congress</b>		Transaction ID: 13129277 Date of Disbursement 09 / 28 / 2006
Mailing Address PO Box 16646		Amount of Each Disbursement this Period 1000.00
City Milwaukee	State WI Zip Code 53216	
Purpose of Disbursement		
Candidate Name Rep. Gwen Moore		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011
State: WI District: 4		

Full Name (Last, First, Middle Initial) <b>B. Nelson For U S Senate</b>		Transaction ID: 12996066 Date of Disbursement 09 / 15 / 2006
Mailing Address PO Box 540154		Amount of Each Disbursement this Period 1000.00
City Omaha	State NE Zip Code 68154	
Purpose of Disbursement		
Candidate Name Sen. Ben Nelson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011
State: NE District: 2		

Full Name (Last, First, Middle Initial) <b>C. Norwood For Congress</b>		Transaction ID: 13129274 Date of Disbursement 09 / 28 / 2006
Mailing Address PO Box 499		Amount of Each Disbursement this Period 1000.00
City Evans	State GA Zip Code 30809	
Purpose of Disbursement		
Candidate Name Rep. Charles Norwood		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011
State: GA District: 9		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Coloradans for Rick O'Donnell</b>		Transaction ID: 12789092 Date of Disbursement 07 / 21 / 2006
Mailing Address P.O. Box 260693		Amount of Each Disbursement this Period 1000.00
City Lakewood State CO Zip Code 80226	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rick O'Donnell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 7	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Joe Pitts</b>		Transaction ID: 12798610 Date of Disbursement 07 / 25 / 2006
Mailing Address PO Box 216		Amount of Each Disbursement this Period 1000.00
City Unionville State PA Zip Code 19375	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Joseph R. Pitts		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pryce For Congress</b>		Transaction ID: 13008388 Date of Disbursement 09 / 21 / 2006
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43215	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Deborah Pryce		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Putnam For Congress</b>		<b>Transaction ID:</b> 13129282 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address Post Office Box 2257		Amount of Each Disbursement this Period 1000.00
City State Zip Code Bartow FL 33831	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Adam H. Putnam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Searchlight Leadership Fund</b>		<b>Transaction ID:</b> 12789093 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 6
Mailing Address 422 C Street, NE Lower Level		Amount of Each Disbursement this Period 2500.00
City State Zip Code Washington DC 20002	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends Of Gordon Smith</b>		<b>Transaction ID:</b> 12771693 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 228 S Washington Ste 115		Amount of Each Disbursement this Period 1000.00
City State Zip Code Alexandria VA 22314	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Gordon Smith		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Snowe For Senate</b>		Transaction ID: 12771697 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 2006		Amount of Each Disbursement this Period 1000.00
City Portland State ME Zip Code 04104	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Olympia Snowe		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Special Teams 2006 Committee</b>		Transaction ID: 13129291 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 75103		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20013	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends Of Cliff Stearns</b>		Transaction ID: 13008634 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address PO Box 308		Amount of Each Disbursement this Period 2500.00
City Silver Springs State FL Zip Code 34489	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Cliff Stearns		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Team Sununu</b>		Transaction ID: 13008276 Date of Disbursement 09 / 21 / 2006
Mailing Address PO Box 500		Amount of Each Disbursement this Period 1000.00
City Rye State NH Zip Code 03870	Purpose of Disbursement 011 Category/Type	
Candidate Name Sen. John Sununu		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Talent For Senate Committee</b>		Transaction ID: 12798604 Date of Disbursement 07 / 25 / 2006
Mailing Address 147 N Meramec Suite 100		Amount of Each Disbursement this Period 2000.00
City St Louis State MO Zip Code 63105	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. James Talent		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tallatchee Creek</b>		Transaction ID: 12995695 Date of Disbursement 09 / 15 / 2006
Mailing Address P.O. Box 29576		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20017	Purpose of Disbursement 011 Category/Type	
Candidate Name		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. The Blue Grass Committee</b>		<b>Transaction ID:</b> 12771700 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 400 North Capitol Street, NW Suite 585		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20001	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Craig Thomas</b>		<b>Transaction ID:</b> 13129297 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address PO Box 1580		Amount of Each Disbursement this Period 2000.00
City Casper State WY Zip Code 82602	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Craig Thomas		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TOMPAC</b>		<b>Transaction ID:</b> 12798391 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 3500.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Trust PAC</b>		Transaction ID: 13008622 Date of Disbursement
Mailing Address 104 Hume Avenue		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City Alexandria	State VA	Zip Code 22301
Purpose of Disbursement	<input type="text" value="011"/> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
Amount of Each Disbursement this Period		<input type="text" value="1500.00"/>

Full Name (Last, First, Middle Initial) <b>B. Turner For Congress</b>		Transaction ID: 12995712 Date of Disbursement
Mailing Address 131 N. Ludlow Street Suite 317		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Dayton	State OH	Zip Code 45402
Purpose of Disbursement	<input type="text" value="011"/> Category/Type	
Candidate Name Rep. Michael R. (Mike) Turner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 3		
Amount of Each Disbursement this Period		<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. David Vitter For U S Senate</b>		Transaction ID: 12971324 Date of Disbursement
Mailing Address PO Box 8175		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>
City Metairie	State LA	Zip Code 70011
Purpose of Disbursement	<input type="text" value="011"/> Category/Type	
Candidate Name Rep. David Vitter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA District: 2		
Amount of Each Disbursement this Period		<input type="text" value="2500.00"/>

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 82

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

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

Full Name (Last, First, Middle Initial) <b>A. Walden For Congress Inc</b>		<b>Transaction ID: 13008283</b>	
Mailing Address PO Box 1091		Date of Disbursement 09 / 21 / 2006	
City Hood River	State OR	Zip Code 97031	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Greg Walden			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OR	District: 2		

Full Name (Last, First, Middle Initial) <b>B. Congressman Waxman Campaign Committee</b>		<b>Transaction ID: 13008362</b>	
Mailing Address 8665 Wilshire Blvd. #220		Date of Disbursement 09 / 21 / 2006	
City Beverly Hills	State CA	Zip Code 90211	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Henry Waxman			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 30		

Full Name (Last, First, Middle Initial) <b>C. Whitfield For Congress Committee</b>		<b>Transaction ID: 13008600</b>	
Mailing Address P.O. Box 391		Date of Disbursement 09 / 21 / 2006	
City Hopkinsville	State KY	Zip Code 42241	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Ed Whitfield			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY	District: 1		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>145000.00</b>



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

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

**A.** Full Name (Last, First, Middle Initial)  
Judge Charlie Baird Campaign

Mailing Address 4909 Interlachen Lane

City Austin State TX Zip Code 78747

Purpose of Disbursement  
Charlie Baird, DISTRICT JUDGES TX

Candidate Name  
Charlie Baird

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: TX District:

Transaction ID: 12881683

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2006

Amount of Each Disbursement this Period

250.00

Charlie Baird, DISTRICT  
JUDGES TX

**B.** Full Name (Last, First, Middle Initial)  
Friends of Mike Francis

Mailing Address 2 Canal Street  
30th Floor

City New Orleans State LA Zip Code 70130

Purpose of Disbursement  
Mike Francis, SECRETARY OF STATE LA

Candidate Name  
Mr. Mike Francis

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: LA District:

Transaction ID: 12881687

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2006

Amount of Each Disbursement this Period

2500.00

Mike Francis, SECRETARY  
OF STATE LA

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

2750.00

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

2750.00

Image# 27930165799

Form/Schedule: **F3XA**  
Transaction ID:

As a result of an amendment that was filed 1/25/2006 the balance was not properly carried over. This is an adjustment of \$66.15 to correct that..

\*\*\*\*\*