

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Management & Training Corporation Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		48155.13
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	59530.13									
(c) Total Receipts (from Line 19)	17497.63	35132.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77027.76	83287.76								
7. Total Disbursements (from Line 31)	16063.18	22323.18								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	60964.58	60964.58								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Management & Training Corporation Political Action Committee

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10275.00	25450.00
(ii) Unitemized	7222.63	9682.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17497.63	35132.63
(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)	17497.63	35132.63
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17497.63	35132.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17497.63	35132.63

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	10000.00	15850.00
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.....	6063.18	6473.18
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))..	16063.18	22323.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16063.18	22323.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17497.63	35132.63
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17497.63	35132.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 20
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Delsa Barber

Mailing Address

City State Zip Code

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2010

Transaction ID: SA11AI.6571

Amount of Each Receipt this Period
250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Wendy Boyd

Mailing Address 937 S Francis Circle

City State Zip Code
Kaysville UT 84037

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

Name of Employer Occupation
MTC Director, Training Programs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2010

Transaction ID: SA11AI.6626

Amount of Each Receipt this Period
250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Dawn Call

Mailing Address 3482 East Canyon Cove Drive

City State Zip Code
Holladay UT 84121

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

Name of Employer Occupation
Management & Training Corp Legal Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2010

Transaction ID: SA11AI.6621

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<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)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Anita Dutson	Date of Receipt MM / DD / YYYY 08 / 27 / 2010
	Mailing Address 5923 Snow Basin Rd	Transaction ID: SA11AI.6618
	City State Zip Code Huntsville UT 84317	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Management & Training Corporation Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00

B.	Full Name (Last, First, Middle Initial) Joann Espinosa	Date of Receipt MM / DD / YYYY 07 / 29 / 2010
	Mailing Address 3181 N. E. 23rd, #J363	Transaction ID: SA11AI.6584
	City State Zip Code Gresham OR	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Springdale Job Corps Center Occupation Center Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) Tom Fitzwater	Date of Receipt MM / DD / YYYY 08 / 20 / 2010
	Mailing Address 2401 Village Rd	Transaction ID: SA11AI.6608
	City State Zip Code Orwigsburg PA 17961	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Management & Training Corp Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	1150.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cara Galleni

Mailing Address 2055 Candle Tree

City State Zip Code
Sandy UT 84092

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

Name of Employer Management & Training Corp Occupation Contract Admin

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2010

Transaction ID: SA11AI.6561

Amount of Each Receipt this Period
300.00

Contribution

B. Full Name (Last, First, Middle Initial)
Randy Grayston

Mailing Address 2634 South Beverly Street

City State Zip Code
Salt Lake City UT 84106

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

Name of Employer Management & Training Corporation Occupation Director, Communications

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2010

Transaction ID: SA11AI.6625

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Elizabeth Lopez

Mailing Address 1309 East 2025 South

City State Zip Code
Ogden UT 84401

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

Name of Employer Management & Training Corporation Occupation Vice President, West Region

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2010

Transaction ID: SA11AI.6619

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jane Marquardt
 Mailing Address 500 North Market Place
 City State Zip Code
 Centerville UT 84014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Marquardt & Fadel Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00
 Date of Receipt MM / DD / YYYY
08 / 27 / 2010
Transaction ID: SA11AI.6614
 Amount of Each Receipt this Period
2500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Dr. Robert L. Marquardt
 Mailing Address 4227 Fern Drive
 City State Zip Code
 Ogden UT 84403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mngt. & Training Corp Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00
 Date of Receipt MM / DD / YYYY
07 / 09 / 2010
Transaction ID: SA11AI.6510
 Amount of Each Receipt this Period
2000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Marshall Matsiga
 Mailing Address 1085 East 4925 South
 City State Zip Code
 Ogden UT 84403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MTC Internal Auditor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt MM / DD / YYYY
07 / 29 / 2010
Transaction ID: SA11AI.6589
 Amount of Each Receipt this Period
250.00
 Contribution

SUBTOTAL of Receipts This Page (optional) 4750.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Celeste McDonald

Mailing Address 245 West 5350 South

City Ogden State UT Zip Code 84405

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

Name of Employer Mngt. & Training Corp Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2010
Transaction ID: SA11AI.6617
Amount of Each Receipt this Period 500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Mike Murphy

Mailing Address 2367 Blain Circle

City Salt Lake City State UT Zip Code 84108

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

Name of Employer Management & Training Corp Occupation Director, Corrections Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2010
Transaction ID: SA11AI.6622
Amount of Each Receipt this Period 500.00
Contribution

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

Mailing Address 2812 Commonweath Ave

City Salt Lake City State UT Zip Code 84109

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

Name of Employer Management & Training Corporation Occupation Director, MTC Institute

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 29 / 2010
Transaction ID: SA11AI.6586
Amount of Each Receipt this Period 350.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

Management & Training Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Carol Savage

Mailing Address 318 N. Bute Street

City State Zip Code
Warrenton NC 27589

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

Name of Employer Occupation
Management & Training Corp Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 09 / 2010

Transaction ID: SA11AI.6526

Amount of Each Receipt this Period

225.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Anita Sharp

Mailing Address 565 West 230 North

City State Zip Code
Layton UT 84041

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

Name of Employer Occupation
Management & Training Corp VP Central Region

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 27 / 2010

Transaction ID: SA11AI.6615

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Gene Weeks

Mailing Address 1043 Deer haven Drive

City State Zip Code
Brigham City UT 84302

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

Name of Employer Occupation
Management & Training Corp Direcotr, Procurement

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2010

Transaction ID: SA11AI.6585

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

975.00

TOTAL This Period (last page this line number only)

10275.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bishop For Congress	Transaction ID: SB23.6636 Date of Disbursement
	Mailing Address Washington Blvd	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Ogden State UT Zip Code 84404	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOB CASEY FOR SENATE INC	Transaction ID: SB23.6644 Date of Disbursement
	Mailing Address 607 14TH STREET NW SUITE 800	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BOSWELL FOR CONGRESS	Transaction ID: SB23.6647 Date of Disbursement
	Mailing Address PO Box 6220	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Des Moines State IA Zip Code 50309	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) CITIZENS FOR HARKIN Mailing Address P O BOX 811 City DES MOINES State IA Zip Code 50304 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6646 Date of Disbursement 09 / 13 / 2010 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) CITIZENS TO ELECT RICK LARSEN Mailing Address PO Box 326 City Everett State WA Zip Code 98206 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6643 Date of Disbursement 09 / 13 / 2010 Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT HENRY HANK JOHNSON Mailing Address 6440 Old Hillandale Drive Suite 262 City Lithonia State GA Zip Code 30058 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 04 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6665 Date of Disbursement 09 / 14 / 2010 Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) DAVID SCOTT FOR CONGRESS	Transaction ID: SB23.6640 Date of Disbursement
	Mailing Address P.O. BOX 960821	<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City RIVERDALE State GA Zip Code 30296	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DOGGETT FOR US CONGRESS	Transaction ID: SB23.6652 Date of Disbursement
	Mailing Address PO Box 5843	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Austin State TX Zip Code 78763	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 25	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Jack Kingston	Transaction ID: SB23.6654 Date of Disbursement
	Mailing Address PO Box 2133 PO Box 2133	<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Savannah State GA Zip Code 31402	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name Friends of Jack Kingston	Category/Type <input type="text" value="011"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
FRIENDS OF MAURICE HINCHEY

Mailing Address PO Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NY District: 22

Transaction ID: SB23.6651

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Friends of Tom Patton

Mailing Address 17157 Rabbit Run Road

City Strongsville State OH Zip Code 44136

Purpose of Disbursement
Contribution

Candidate Name
AKAKA IN 2000

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: HI District: 00

Transaction ID: SB23.6591

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
GEORGIANS FOR ISAKSON

Mailing Address POST OFFICE BOX 250116

City ATLANTA State GA Zip Code 30325

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: GA District: 00

Transaction ID: SB23.6642

Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) LOEBSACK FOR CONGRESS	Transaction ID: SB23.6638 Date of Disbursement 09 / 07 / 2010
	Mailing Address PO Box 2720	
	City Cedar Rapids State IA Zip Code 52406	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MATHESON FOR CONGRESS	Transaction ID: SB23.6637 Date of Disbursement 09 / 24 / 2010
	Mailing Address PO Box 521048 Suite A	
	City Salt Lake City State UT Zip Code 84152	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ORTIZ FOR CONGRESS COMMITTEE	Transaction ID: SB23.6653 Date of Disbursement 09 / 21 / 2010
	Mailing Address P. O. Box 7806 P. O. Box 7806	
	City Corpus Christi State TX Zip Code 78467	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 27	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) PENNSYLVANIANS FOR KANJORSKI	Transaction ID: SB23.6645
	Mailing Address 103 SOUTH HANOVER STREET	Date of Disbursement 09 / 15 / 2010
	City NANTICOKE State PA Zip Code 18634	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SESTAK FOR CONGRESS	Transaction ID: SB23.6649
	Mailing Address P.O. Box 16	Date of Disbursement 09 / 14 / 2010
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WHITFIELD FOR CONGRESS COMMITTEE	Transaction ID: SB23.6650
	Mailing Address P.O. BOX 391	Date of Disbursement 09 / 15 / 2010
	City HOPKINSVILLE State KY Zip Code 42241	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Batchelder for Representative Committee	Transaction ID: SB29.6662 Date of Disbursement
	Mailing Address 4086 Irvine Oval	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Medina State OH Zip Code 44256	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens for Buehrer	Transaction ID: SB29.6660 Date of Disbursement
	Mailing Address 704 Greenview Dr.	<input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Delta State OH Zip Code 43515	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name ABERCROMBIE FOR CONGRESS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Committee to Elect Blessing	Transaction ID: SB29.6657 Date of Disbursement
	Mailing Address	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State OH Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Management & Training Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Committee to ElectChris Widener	Transaction ID: SB29.6656 Date of Disbursement
	Mailing Address	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Springfield State OH Zip Code 45502	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Committee to Elect Niehaus	Transaction ID: SB29.6658 Date of Disbursement
	Mailing Address 1131 Little Indian Creek Rd	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Richmond State OH Zip Code 45157	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Freinds of Faber	Transaction ID: SB29.6661 Date of Disbursement
	Mailing Address 7706 St Rd.	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Celina State OH Zip Code 45822	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

Management & Training Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Grendell For Good Government

Mailing Address 7413 Tattersall Dr.

City State Zip Code
Chesterland OH 44026

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6025

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)