

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
NARAL Pro-Choice America

ADDRESS (number and street) 1156 15th Street NW Suite 700
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00079541
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 06 01 2008 through 06 30 2008

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

Type or Print Name of Treasurer John Botts

Signature of Treasurer Electronically Filed by John Botts Date 07 18 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
NARAL Pro-Choice America

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		258462.99
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	236527.57									
(c) Total Receipts (from Line 19)	17035.80	129963.48								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	253563.37	388426.47								
7. Total Disbursements (from Line 31)	105798.45	240661.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	147764.92	147764.92								
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
NARAL Pro-Choice America

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	750.00	75280.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	15937.64	50925.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16687.64	126205.64
(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)	16687.64	126205.64
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.)	348.16	3757.84
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))	17035.80	129963.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17035.80	129963.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	64298.45	74661.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	64298.45	74661.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	41500.00	166000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	105798.45	240661.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	105798.45	240661.55

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)	16687.64	126205.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16687.64	126205.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	64298.45	74661.55
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	64298.45	74661.55

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 14
	(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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
Richard A. Gross

Mailing Address 4821 32nd St NW

City State Zip Code
Washington DC 20008-2242

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

Name of Employer Property Funding Group Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2008

Transaction ID: C4936631

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mauree J. Perry

Mailing Address 2606 Jackson Street

City State Zip Code
San Francisco CA 94115

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

Name of Employer Self-Employed Occupation Oral Historian and Editor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: C4936681

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full) NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial) Allfirst		Date of Receipt
Mailing Address PO Box 1596		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
City	State	Zip Code
Baltimore	MD	21203-1596
FEC ID number of contributing federal political committee.		Transaction ID: C4937565
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="348.16"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	* Interest
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3757.84"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="348.16"/>
TOTAL This Period (last page this line number only)	<input type="text" value="348.16"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America

A.	Full Name (Last, First, Middle Initial) Allfirst Mailing Address PO Box 1596 City Baltimore State MD Zip Code 21203-1596 Purpose of Disbursement Banking Fees for PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220208 Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 35.70
B.	Full Name (Last, First, Middle Initial) Allfirst Mailing Address PO Box 1596 City Baltimore State MD Zip Code 21203-1596 Purpose of Disbursement Credit Card Processing Fees for PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220209 Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 226.00
C.	Full Name (Last, First, Middle Initial) Global Payment Solutions Mailing Address 10705 Red Run Blvd City Owings Mills State MD Zip Code 21117-5134 Purpose of Disbursement Credit Card Processing Fees for PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220210 Date of Disbursement 06 / 30 / 2008 Amount of Each Disbursement this Period 175.65

SUBTOTAL of Disbursements This Page (optional) ▶	437.35
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Greenberg Quinlan Rosner</p> <p>Mailing Address 10 G Street, NE Suite 500</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Polling for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D220225 Date of Disbursement 06 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 60000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Harris Direct</p> <p>Mailing Address 6800 Owensmouth Ave Ste 200</p> <p>City Canoga Park State CA Zip Code 91303-3170</p> <p>Purpose of Disbursement Telemarketing for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D220226 Date of Disbursement 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 3384.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Pacific East</p> <p>Mailing Address PO Box 439</p> <p>City Sumas State WA Zip Code 98295-0439</p> <p>Purpose of Disbursement Printing for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D220223 Date of Disbursement 06 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 427.10</p>

SUBTOTAL of Disbursements This Page (optional) ▶

63811.10

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 14

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

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NAME OF COMMITTEE (In Full)
NARAL Pro-Choice America

A.	Full Name (Last, First, Middle Initial) Payment Solutions, Inc.			Transaction ID: D220224 Date of Disbursement																					
	Mailing Address PO Box 30217			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	6		1	2		2	0	0	8																
	City Bethesda	State MD	Zip Code 20824-0217	Amount of Each Disbursement this Period																					
	Purpose of Disbursement Credit Card Processing for PAC			<table border="1"> <tr> <td colspan="10" style="text-align: right;">50.00</td> </tr> </table>			50.00																		
50.00																									
	Candidate Name			Category/ Type																					
	Office Sought:	Disbursement For:																							
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
	State:	District:																							

SUBTOTAL of Disbursements This Page (optional)	50.00
TOTAL This Period (last page this line number only)	64298.45

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)
NARAL Pro-Choice America

A. Full Name (Last, First, Middle Initial) Alaskans for Begich <hr/> Mailing Address PO BOX 240287 <hr/> City ANCHORAGE State AK Zip Code 99524 <hr/> Purpose of Disbursement Contribution Candidate Name Mark Begich Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220212 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Braley for Congress <hr/> Mailing Address PO Box 390 <hr/> City Waterloo State IA Zip Code 50704 <hr/> Purpose of Disbursement Contribution Candidate Name Bruce L. Braley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220213 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS <hr/> Mailing Address 38 Risley Road <hr/> City Vernon State CT Zip Code 06066 <hr/> Purpose of Disbursement Contribution Candidate Name Joe Courtney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D220214 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 14

<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)
NARAL Pro-Choice America

<p>A. Full Name (Last, First, Middle Initial) Darcy Burner for Congress</p> <p>Mailing Address PO Box 1090</p> <p>City Carnation State WA Zip Code 98014</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Darcy Burner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D220215 Date of Disbursement 06 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) DONNA EDWARDS FOR CONGRESS</p> <p>Mailing Address P.O. Box 441153</p> <p>City Fort Washington State MD Zip Code 20749</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Donna Edward</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special</p>	<p>Transaction ID: D220216 Date of Disbursement 06 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Hillary Clinton for President</p> <p>Mailing Address PO Box 101436</p> <p>City Arlington State VA Zip Code 22210</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Hillary Clinton</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D220217 Date of Disbursement 06 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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)
NARAL Pro-Choice America

A.

Full Name (Last, First, Middle Initial)
JOHN LEWIS FOR CONGRESS

Transaction ID: D220219

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	8

Mailing Address 303 Peachtree Street, NE
Suite 5300

Amount of Each Disbursement this Period

2500.00

City Atlanta State GA Zip Code 30308

Purpose of Disbursement
Contribution

--

Category/
Type

Candidate Name
John Lewis

Office Sought: House
 Senate
 President
State: GA District: 05

Disbursement For: 2008
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
LOEBSACK FOR CONGRESS

Transaction ID: D220220

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	8

Mailing Address PO Box 1457

Amount of Each Disbursement this Period

2500.00

City Iowa City State IA Zip Code 52244

Purpose of Disbursement
Contribution

--

Category/
Type

Candidate Name
David Loeb sack

Office Sought: House
 Senate
 President
State: IA District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
MINNICK FOR CONGRESS

Transaction ID: D220221

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	8

Mailing Address 7964 W Fairview Avenue

Amount of Each Disbursement this Period

1500.00

City Boise State ID Zip Code 83704

Purpose of Disbursement
Contribution

--

Category/
Type

Candidate Name
Walt Minnick

Office Sought: House
 Senate
 President
State: ID District: 01

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

6500.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
NARAL Pro-Choice America

A.	Full Name (Last, First, Middle Initial) Nadler for Congress	Transaction ID: D220222 Date of Disbursement 06 / 12 / 2008
	Mailing Address P.O. Box 40 Village Station	Amount of Each Disbursement this Period 2500.00
	City New York State NY Zip Code 10014	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Jerry Nadler	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: D220227 Date of Disbursement 06 / 12 / 2008
	Mailing Address PO BOX 100	Amount of Each Disbursement this Period 5000.00
	City BATTLE CREEK State MI Zip Code 49016	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Mark Schauer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Welch for Congress	Transaction ID: D220228 Date of Disbursement 06 / 12 / 2008
	Mailing Address PO Box 1086	Amount of Each Disbursement this Period 2500.00
	City Montpelier State VT Zip Code 05601	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Peter Welch	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	41500.00