

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12 FEB 4 2005

CAMPAIGN FOR OUR COMMON FUTURE

HOWARD L. TAYLOR PRESIDENT

ADDRESS (number and street)

32 FIVE HILLS

Check if different than previously reported (ADC)

ARIZONA 04 44307-1332

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00043172

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 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)

Election on

in the State of

5. Covering Period

01 2002

through

09 30 2002

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

Howard L. Taylor

Signature of Treasurer

Howard L Taylor

Date

10 12 2002

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

Office Use Only

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

CAMPAIGN FOR U N Reform Political Action Committee

Report Covering the Period:

From:

07/01/2001

To:

07/31/2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		11672.71
(b) Cash on Hand at Beginning of Reporting Period	12234.71	
(c) Total Receipts (from Line 19)	13941.00	33103.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	26175.71	44775.71
7. Total Disbursements (from Line 30)	25700.00	44300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	475.71	475.71
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

FED Form SX (Revised 1/01)

Page 3

Write or Type Committee Name

CAMPAIN FOR UN REPUBLICAN POLITICAL ACTION COMMITTEE

Report Covering the Period: From: *07/01/2001* To: *01/31/2002*

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) (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	<i>6,829.00</i> <i>7,112.00</i> <i>13,941.00</i>	<i>33,103.00</i>
(b) Political Party Committees	<i>0.00</i>	<i>0.00</i>
(c) Other Political Committees (such as PACs)	<i>0.00</i>	<i>0.00</i>
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	<i>13,941.00</i>	<i>33,103.00</i>
12. Transfers From Affiliated/Other Party Committees	<i>0.00</i>	<i>0.00</i>
13. All Loans Received	<i>0.00</i>	<i>0.00</i>
14. Loan Repayments Received	<i>0.00</i>	<i>0.00</i>
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	<i>0.00</i>	<i>0.00</i>
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	<i>0.00</i>	<i>0.00</i>
17. Other Federal Receipts (Dividends, Interest, etc.)	<i>0.00</i>	<i>0.00</i>
18. Transfers from Nonfederal Account for Joint Activity	<i>0.00</i>	<i>0.00</i>
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	<i>13,941.00</i>	<i>33,103.00</i>
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	<i>13,941.00</i>	<i>33,103.00</i>

DETAILED SUMMARY PAGE
of Disbursements

FEC Form SX (Revised 1/01)

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 H#)		
(i) Federal Share	0 0 0	0 0 0
(ii) Non-Federal Share	0 0 0	0 0 0
(b) Other Federal Operating Expenditures	0 0 0	0 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0 0 0	0 0 0
22. Transfers to Affiliated/Other Party Committees	0 0 0	0 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	25 7 0 0 0 0	4 4 3 0 0 0
24. Independent Expenditures (use Schedule E)	0 0 0	0 0 0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0 0 0	0 0 0
26. Loan Repayments Made	0 0 0	0 0 0
27. Loans Made	0 0 0	0 0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Candidates	0 0 0	0 0 0
(b) Political Party Committees	0 0 0	0 0 0
(c) Other Political Committees (such as PACs)	0 0 0	0 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 0 0	0 0 0
29. Other Disbursements	0 0 0	0 0 0
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	25 7 0 0 0 0	4 4 3 0 0 0
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	25 7 0 0 0 0	4 4 3 0 0 0
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	13 9 4 1 0 0	2 3 1 0 3 0 0
33. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	13 9 4 1 0 0	2 3 1 0 3 0 0
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 0 0	0 0 0
36. Offsets to Operating Expenditures (from Line 15, page 3)	0 0 0	0 0 0
37. Net Operating Expenditures (subtract Line 36 from Line 35)	0 0 0	0 0 0

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 8

(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)

COMMITTEE FOR U.S. REFORM POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) *SMITH, JAMES*

Mailing Address *623 MOORE ROAD*

City *GRANVILLE* State *OH* Zip Code *43032*

FEC ID number of contributing federal political committee *C*

Name of Employer *RETIRED* Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date *1000.00*

Date of Receipt *07 01 2002*

Amount of Each Receipt this Period *1000.00*

B. Full Name (Last, First, Middle Initial) *FUGUS, JOHN*

Mailing Address *25 BENTLEYVILLE ROAD*

City *ASHLAND* State *NC* Zip Code *28707*

FEC ID number of contributing federal political committee *C*

Name of Employer *SELF EMPLOYED* Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date *200.00*

Date of Receipt *07 18 2002*

Amount of Each Receipt this Period *200.00*

C. Full Name (Last, First, Middle Initial) *KRANI, DON*

Mailing Address *8604 WILKINSON ROAD*

City *ALEXANDRIA* State *VA* Zip Code *22308*

FEC ID number of contributing federal political committee *C*

Name of Employer *CANDIDATE FOR U.S. SENATE* Occupation *EXECUTIVE DIRECTOR*

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date *4700.00*

Date of Receipt *07 20 2002*

Amount of Each Receipt this Period *4700.00*

SUBTOTAL of Receipts This Page (optional) *11700.00*

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	FOIR LINE NUMBER: (check only one)		PAGE <u>2</u> OF <u>8</u>	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)
COMMISSION FOR U.S. WOMEN POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
BOBBE, ELIZETH

Mailing Address
630 E. ALABAMA ST.

City *SANTA FE* State *NM* Zip Code *87501*

FEC ID number of contributing federal political committee
C

Name of Employer
UNKNOWN Occupation
PROPERTY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60000

Date of Receipt
07 / 23 / 2002

Amount of Each Receipt this Period
50000

B. Full Name (Last, First, Middle Initial)
CHU, NANNY

Mailing Address
P.O. Box 27

City *MYRTLE BEACH* State *MD* Zip Code *21223*

FEC ID number of contributing federal political committee
C

Name of Employer
RETIRED Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24800

Date of Receipt
07 / 23 / 2002

Amount of Each Receipt this Period
17500

C. Full Name (Last, First, Middle Initial)
GROSSER, RONARD

Mailing Address
8824 BERNAY AVE.

City *SAINT LOUIS* State *MO* Zip Code *63136*

FEC ID number of contributing federal political committee
C

Name of Employer
RETIRED Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000

Date of Receipt
07 / 23 / 2002

Amount of Each Receipt this Period
20000

SUBTOTAL of Receipts This Page (optional) ▶ *84500*

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 3 OF 8	
<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"/>		<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	18
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (in full)
CAMPAIN FOR V.I.N. ROBERT POWELL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. LEO, MONROE		Date of Receipt <i>07 25 2002</i>
Mailing Address <i>3118 GARFIELD RD. Apt 208</i>		Amount of Each Receipt this Period <i>152.00</i>
City <i>SILVER SPRING</i>	State <i>MD</i>	
FEC ID number of contributing federal political committee <i>C</i>		
Name of Employer <i>RETIRED</i>		Occupation
Receipt For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>212.00</i>

Full Name (Last, First, Middle Initial) B. PATE, THEODORE		Date of Receipt <i>07 30 2002</i>
Mailing Address <i>5111 VANGUARD HILL</i>		Amount of Each Receipt this Period <i>500.00</i>
City <i>MADISON</i>	State <i>WI</i>	
FEC ID number of contributing federal political committee <i>C</i>		
Name of Employer <i>RETIRED</i>		Occupation
Receipt For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>500.00</i>

Full Name (Last, First, Middle Initial) C. RUPAR, BOB		Date of Receipt <i>07 30 2002</i>
Mailing Address <i>485 W. STRAIN AN. SW 118 AA</i>		Amount of Each Receipt this Period <i>500.00</i>
City <i>WATKINSON</i>	State <i>WI</i>	
FEC ID number of contributing federal political committee <i>C</i>		
Name of Employer <i>RETIRED</i>		Occupation
Receipt For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>1,000.00</i>

SUBTOTAL of Receipts This Page (optional)	<i>1,152.00</i>
TOTAL This Period (see page that line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 9 OF 9	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<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)
CAMPAIGN FOR U.S. REPUBLICAN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. <i>DAMON, SYDNEY</i>		Date of Receipt <i>07 31 2002</i>
Mailing Address <i>9413 Fern Hillway</i>		Amount of Each Receipt this Period <i>25000</i>
City <i>Montgomery Village</i>	State <i>MD</i>	
Zip Code <i>20886</i>		Amount of Each Receipt this Period <i>25000</i>
FEC ID number of contributing federal political committee <i>C</i>		
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>		Aggregate Year-to-Date <input type="checkbox"/> <i>25000</i>

Full Name (Last, First, Middle Initial) B. <i>DAMON, SYDNEY</i>		Date of Receipt <i>08 03 2002</i>
Mailing Address <i>9413 Fern Hillway</i>		Amount of Each Receipt this Period <i>3000</i>
City <i>Montgomery Village</i>	State <i>MD</i>	
Zip Code <i>20886</i>		Amount of Each Receipt this Period <i>3000</i>
FEC ID number of contributing federal political committee <i>C</i>		
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>		Aggregate Year-to-Date <input type="checkbox"/> <i>25000</i>

Full Name (Last, First, Middle Initial) C. <i>SMITH, HAROLD</i>		Date of Receipt <i>08 04 2002</i>
Mailing Address <i>1706 Ryan Ave W.</i>		Amount of Each Receipt this Period <i>20000</i>
City <i>Saint Paul</i>	State <i>MN</i>	
Zip Code <i>55113</i>		Amount of Each Receipt this Period <i>20000</i>
FEC ID number of contributing federal political committee <i>C</i>		
Name of Employer <i>UNIVERSITY</i>	Occupation <i>PROFESSOR</i>	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>		Aggregate Year-to-Date <input type="checkbox"/> <i>120000</i>

SUBTOTAL of Receipts This Page (optional)	<i>48000</i>
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 1 OF 8

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (in Full)

Campaign for U.N. Return POWERS ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) *PUTER, NORA*
 Mailing Address *6541 BROMFIELD RD.*
 City *CHRY CHASE* State *MD* Zip Code *20817*
 Date of Receipt *08 07 2002*
 Amount of Each Receipt This Period *1 000 00*
 FEC ID number of contributing federal political committee. *C*
 Name of Employer *RETIRED* Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date *1 000 00*

B. Full Name (Last, First, Middle Initial) *DAVLET, FAYO*
 Mailing Address *191 Sycamore Rd.*
 City *WEST HARTFORD* State *CT* Zip Code *06117*
 Date of Receipt *08 13 2002*
 Amount of Each Receipt This Period *5 000 00*
 FEC ID number of contributing federal political committee. *C*
 Name of Employer *RETIRED* Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date *5 000 00*

C. Full Name (Last, First, Middle Initial) *LUSTVA, CATHERINA*
 Mailing Address *76 KENNEDY DR*
 City *COBBLETON* State *OH* Zip Code *44079*
 Date of Receipt *08 22 2002*
 Amount of Each Receipt This Period *5 000 00*
 FEC ID number of contributing federal political committee. *C*
 Name of Employer *RETIRED* Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date *6 000 00*

SUBTOTAL of Receipts This Page (optional) *2 000 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 6 OF 8	
<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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (in full)
CAMPAIN FOR U.S. RUSSIAN POWERSHIP ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. <i>DAWSON, STEPHEN</i>		Date of Receipt <i>08 30 2002</i>
Mailing Address <i>9413 Fern Hollow Way</i>		Amount of Each Receipt this Period <i>3000</i>
City <i>MONTGOMERY VILLAGE</i>	State <i>MD</i>	
FEC ID number of contributing federal political committee <i>C</i>		Amount of Each Receipt this Period <i>31000</i>
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <i>31000</i>	

Full Name (Last, First, Middle Initial) B. <i>CLEMMER, JAMES</i>		Date of Receipt <i>07 29 2002</i>
Mailing Address <i>13775 SW Schools Ferry Rd. # 312</i>		Amount of Each Receipt this Period <i>7800</i>
City <i>DAVENTON</i>	State <i>OR</i>	
FEC ID number of contributing federal political committee <i>C</i>		Amount of Each Receipt this Period <i>22400</i>
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <i>22400</i>	

Full Name (Last, First, Middle Initial) C. <i>DAVE, DORIS STAN</i>		Date of Receipt <i>07 29 2002</i>
Mailing Address <i>2681 BURGESS CT.</i>		Amount of Each Receipt this Period <i>20000</i>
City <i>LIVANWOOD</i>	State <i>MS</i>	
FEC ID number of contributing federal political committee <i>C</i>		Amount of Each Receipt this Period <i>20000</i>
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date <i>20000</i>	

SUBTOTAL of Receipts This Page (include all)	<i>30400</i>
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 OF 8	
<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	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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NAME OF COMMITTEE (in Full)
CAMPAIN FOR U.N. REFUGEE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. <i>FRANKOWSKI, SUZAN</i>		Date of Receipt <i>09 29 2002</i>
Mailing Address <i>10500 RESERVILLE PIKE APT. 3</i>		Amount of Each Receipt this Period <i>10000</i>
City <i>ROCKVILLE</i>	State Zip Code <i>MD 20812</i>	
FEC ID number of contributing federal political committee <i>C</i>		Amount of Each Receipt this Period <i>10000</i>
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <i>20000</i>	

Full Name (Last, First, Middle Initial) B. <i>HEWENAY, DOROTHY</i>		Date of Receipt <i>09 29 2002</i>
Mailing Address <i>133 KENNEDY DR.</i>		Amount of Each Receipt this Period <i>40000</i>
City <i>KENNETT SQUARE</i>	State Zip Code <i>PA 19348</i>	
FEC ID number of contributing federal political committee <i>C</i>		Amount of Each Receipt this Period <i>40000</i>
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <i>40000</i>	

Full Name (Last, First, Middle Initial) C. <i>NYBERG, CARL</i>		Date of Receipt <i>09 29 2002</i>
Mailing Address <i>5624 OWNEY ST.</i>		Amount of Each Receipt this Period <i>15000</i>
City <i>CHEVYCH</i>	State Zip Code <i>MO 20781</i>	
FEC ID number of contributing federal political committee <i>C</i>		Amount of Each Receipt this Period <i>15000</i>
Name of Employer <i>UNEMPLOYED</i>	Occupation <i>COMPANY AND POLITICAL CONSULTANT</i>	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <i>20000</i>	

SUBTOTAL of Receipts This Page (optional)	<i>65000</i>
TOTAL This Period (last page use 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 8 OF 8	
<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"/>		<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	18
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
CAMPBELL FOR U.S. SENATOR POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. <i>THOMAS, FRANKLIN</i>		Date of Receipt <i>09 30 2002</i>
Mailing Address <i>905 BRAWLEY AVE NW</i>		Amount of Each Receipt This Period <i>225.00</i>
City <i>OLYMPIA</i>	State <i>WA</i>	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>RETIRED</i>	Occupation	
Receipt For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <i>225.00</i>	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Amount of Each Receipt This Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt This Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	<i>225.00</i>
TOTAL This Period (last page this line number only)	<i>6829.00</i>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21a	<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"/> 29
------------------------------	-----------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	------------------------------	------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPBELL FOR U.S. SENATE, POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. *SENATOR CHRIS DOOO*

Date of Disbursement

07/01/2002

Mailing Address

PUSHAM PARK 100 GREAT MEADOW ROAD

City

WETHERSFIELD

State

CT

Zip Code

06107

Amount of Each Disbursement this Period

10000

Purpose of Disbursement

CONTRIBUTION IN SUPPORT

Category/Type
011

Candidate Name

CHRIS DOOO

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) *CONTRIBUTION IN SUPPORT*

State: *CT* District:

Full Name (Last, First, Middle Initial)

B. *NANCY POLANSKI FOR CONGRESS*

Date of Disbursement

07/01/2002

Mailing Address

235 MONTGOMERY STREET SUITE 610

City

SAN FRANCISCO

State

CA

Zip Code

94107

Amount of Each Disbursement this Period

5000

Purpose of Disbursement

CONTRIBUTION IN SUPPORT

Category/Type
011

Candidate Name

NANCY POLANSKI

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *CA* District: *08*

Full Name (Last, First, Middle Initial)

C. *BOB CLEMENT FOR U.S. SENATE*

Date of Disbursement

08/01/2002

Mailing Address

7420 E. BROOKFIELD

City

NASHVILLE

State

TN

Zip Code

37205

Amount of Each Disbursement this Period

10000

Purpose of Disbursement

CONTRIBUTION IN SUPPORT

Category/Type
011

Candidate Name

BOB CLEMENT

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *TN* District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

25000

**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 2 OF 12	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (in Full)
CAMPION FOR U.N. RESUME Political Action Committee

Full Name (Last, First, Middle Initial) A. Tim Johnson for South Dakota		Date of Disbursement 08 01 2002
Mailing Address 604 WEST AVE. N		Amount of Each Disbursement this Period 1 000 00
City SIOUX FALLS	State SD Zip Code 57104	
Purpose of Disbursement CONTRIBUTION OF SUPPORT		Category Type 011
Candidate Name TIM JOHNSON		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD District:		

Full Name (Last, First, Middle Initial) B. Alex Sanders for U.S. Senate		Date of Disbursement 08 01 2002
Mailing Address P.O. Box 11903		Amount of Each Disbursement this Period 2 000 00
City COLUMBIA	State SC Zip Code 29211	
Purpose of Disbursement CONTRIBUTION OF SUPPORT		Category Type 011
Candidate Name ALEXANDER SANDERS		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC District:		

Full Name (Last, First, Middle Initial) C. Michael for Congress		Date of Disbursement 08 01 2002
Mailing Address 213 LISBON ST.		Amount of Each Disbursement this Period 1 000 00
City LEWISTON	State ME Zip Code 04240	
Purpose of Disbursement CONTRIBUTION OF SUPPORT		Category Type 011
Candidate Name MICHAEL MICHAEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ME District: 02		

SUBTOTAL of Disbursements This Page (optional)	4 000 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 3 OF 10

21a 22 23 24 25
 26 27 28a 28b 29

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NAME OF COMMITTEE (in Full)
CAMPAIN FOR U.S. REPUBLICAN POLITICAL ACTION COMMITTEE

A. *JULIA CARSON FOR CONGRESS COMMITTEE*

Full Name (Last, First, Middle Initial)
JULIA CARSON FOR CONGRESS COMMITTEE

Date of Disbursement
09 01 2002

Mailing Address
ONE NORTH CAPITOL, SUITE 211

City
INDIANAPOLIS State
IN Zip Code
46205

Purpose of Disbursement
CONTRIBUTION IN SUPPORT

Candidate Name
JULIA CARSON Category/Type
011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *IN* District: *07*

Amount of Each Disbursement this Period
500.00

B. *POMEROY FOR CONGRESS*

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

Date of Disbursement
08 01 2002

Mailing Address
405 EAST INTERNATIONAL AVE.

City
BISMARCK State
ND Zip Code
58502

Purpose of Disbursement
CONTRIBUTION IN SUPPORT

Candidate Name
ERIN POMEROY Category/Type
011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *ND* District: *01*

Amount of Each Disbursement this Period
300.00

C. *COMMITTEE TO ELECT ED O'BRIEN*

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT ED O'BRIEN

Date of Disbursement
08 01 2002

Mailing Address
P.O. Box 447

City
GETTYSBURG State
PA Zip Code
16018

Purpose of Disbursement
CONTRIBUTION IN SUPPORT

Candidate Name
ED O'BRIEN Category/Type
011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *PA* District: *15*

Amount of Each Disbursement this Period
500.00

SUBTOTAL of Disbursements This Page (optional) *1300.00*

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 4 OF 10	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 29
<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 29b	<input type="checkbox"/> 29c	<input type="checkbox"/> 29d

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NAME OF COMMITTEE (In Full)
COMMITTEE FOR U.S. HOUSE REFORM POSITIONAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. CYNTHIA McKENNEY FOR CONGRESS		Date of Disbursement <i>08 01 2002</i>
Mailing Address <i>P.O. Box 371125</i>		Amount of Each Disbursement this Period <i>2000.00</i>
City <i>DECATUR</i>	State <i>GA</i>	
Zip Code <i>30037</i>		Category/Type <i>011</i>
Purpose of Disbursement <i>CONTRIBUTION OF SUPPORT</i>		
Candidate Name <i>CYNTHIA McKENNEY</i>		Office Sought: <input checked="" type="checkbox"/> House Senate President
Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: <i>GA</i> District: <i>04</i>		

Full Name (Last, First, Middle Initial) B. TOM LANTOS FOR CONGRESS COMMITTEE		Date of Disbursement <i>08 01 2002</i>
Mailing Address <i>P.O. Box 611</i>		Amount of Each Disbursement this Period <i>1000.00</i>
City <i>BURLINGAME</i>	State <i>CA</i>	
Zip Code <i>94011</i>		Category/Type <i>011</i>
Purpose of Disbursement <i>CONTRIBUTION OF SUPPORT</i>		
Candidate Name <i>TOM LANTOS</i>		Office Sought: <input checked="" type="checkbox"/> House Senate President
Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: <i>CA</i> District: <i>12</i>		

Full Name (Last, First, Middle Initial) C. COMMITTEE TO RE-ELECT DELANDINI		Date of Disbursement <i>08 01 2002</i>
Mailing Address <i>9 KETCH LANE</i>		Amount of Each Disbursement this Period <i>1000.00</i>
City <i>QUINCY</i>	State <i>MA</i>	
Zip Code <i>02171</i>		Category/Type <i>011</i>
Purpose of Disbursement <i>CONTRIBUTION OF SUPPORT</i>		
Candidate Name <i>WILLIAM DELANDINI</i>		Office Sought: <input checked="" type="checkbox"/> House Senate President
Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: <i>MA</i> District: <i>10</i>		

SUBTOTAL of Disbursements This Page (optional)	<i>4000.00</i>
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 NUMBERS: (check only one)		PAGE 5 OF 10	
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 29
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 25a	<input type="checkbox"/> 28a	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
CAMPAIN FOR U.S. SENATOR PATRICIA KEENEY COMMITTEE

A. FRIENDS OF PATRICIA KEENEY

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: *08 01 2022*

Mailing Address: *MANAGEMENT PARK PLACE, 627 BERKSHIRE HILLS AVE.*

City: *PAWTUCKET* State: *RI* Zip Code: *02861*

Purpose of Disbursement: *CONTRIBUTION OF SUPPORT* Category/Type: *011*

Candidate Name: *PATRICIA KEENEY*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: *RI* District: *01*

Amount of Each Disbursement this Period: *1 000 00*

B. WELLSFORD FOR SENATOR

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: *08 14 2022*

Mailing Address: *2341 UNIVERSITY AVE. WEST PO BOX 14337*

City: *ST. PAUL* State: *MN* Zip Code: *55114*

Purpose of Disbursement: *CONTRIBUTION OF SUPPORT* Category/Type: *011*

Candidate Name: *PAUL WELLSFORD*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: *MN* District: _____

Amount of Each Disbursement this Period: *1 900 00*

C. FRIENDS OF ROGER KAHN

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: *08 30 2022*

Mailing Address: *633 CASH-PINE LOG ROAD*

City: *RYDAL* State: *GA* Zip Code: *30271*

Purpose of Disbursement: *CONTRIBUTION OF SUPPORT* Category/Type: *011*

Candidate Name: *ROGER KAHN*

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: *GA* District: *11*

Amount of Each Disbursement this Period: *5 000 00*

SUBTOTAL of Disbursements This Page (optional) *3 400 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

FORM LINE NUMBER (check only one)

PAGE 6 OF 10

21b 22 23 24 25
 26 27 28a 28b 28c 29

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NAME OF COMMITTEE (In Full)

CAMPAIN FOR U.S. REPUBLICAN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. HENRY JACOBI FOR CONGRESS

Date of Disbursement

08 30 2002

Mailing Address

760 STATE ROAD 934 NORTON

City

AWARANTA SPRINGS

State

FL

Zip Code

32714

Amount of Each Disbursement this Period

1 000 00

Purpose of Disbursement

CONTRIBUTION OF SUPPORT

011

Candidate Name

HENRY JACOBI

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: FL

District: 24

Full Name (Last, First, Middle Initial)

B. KENNY FOR CONGRESS CAMPAIGN

Date of Disbursement

08 30 2002

Mailing Address

33014 5 MILE ROAD

City

LIVONIA

State

MI

Zip Code

48154

Amount of Each Disbursement this Period

5 000 00

Purpose of Disbursement

CONTRIBUTION OF SUPPORT

011

Candidate Name

KEVIN KENNY

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: MI

District: 11

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR HARRIS

Date of Disbursement

08 30 2002

Mailing Address

508 COTTAGE

City

CUMMING

State

IA

Zip Code

52001

Amount of Each Disbursement this Period

1 000 00

Purpose of Disbursement

CONTRIBUTION OF SUPPORT

011

Candidate Name

THOMAS HARRIS

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: IA

District:

SUBTOTAL of Disbursements This Page (optional) ▶

2 500 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 7 OF 10

21a 22 23 24 25
 26 27 28a 28b 29c 29

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NAME OF COMMITTEE (In Full)
CAMPAIGN FOR U.S. REPUBLICAN POLITICAL ACTION COMMITTEE

A. *TORRICELLI FOR SENATE*

Full Name (Last, First, Middle Initial) _____

Mailing Address *305 GARDEN STREET 6TH FLOOR*

City *NEW BRUNSWICK* State *NJ* Zip Code *08901*

Purpose of Disbursement *CONTRIBUTION OF SUPPORT* Category/Type *011*

Candidate Name *ROBERT TORRICELLI*

Office Sought: House _____ Senate President _____

Disbursement For: Primary _____ General Other (specify) _____

State: *NJ* District: _____

Date of Disbursement *08 30 2002*

Amount of Each Disbursement This Period *10000*

B. *HERGENROT FOR CONGRESS*

Full Name (Last, First, Middle Initial) _____

Mailing Address *4308 CALLAHAN AVENUE*

City *LAS VEGAS* State *NV* Zip Code *89120*

Purpose of Disbursement *CONTRIBUTION OF SUPPORT* Category/Type *011*

Candidate Name *DARIO HERGENROT*

Office Sought: House _____ Senate President _____

Disbursement For: Primary General _____ Other (specify) _____

State: *NV* District: *03*

Date of Disbursement *08 30 2002*

Amount of Each Disbursement This Period *50000*

C. *CLARK FOR CONGRESS*

Full Name (Last, First, Middle Initial) _____

Mailing Address *147 MIDDLE ST.*

City *PARTIMOUTH* State *NH* Zip Code *03802*

Purpose of Disbursement *CONTRIBUTION OF SUPPORT* Category/Type *011*

Candidate Name *MARTHA FLEURA CLARK*

Office Sought: House Senate _____ President _____

Disbursement For: Primary General _____ Other (specify) _____

State: *NH* District: *01*

Date of Disbursement *08 30 2002*

Amount of Each Disbursement This Period *10000*

SUBTOTAL of Disbursements This Page (optional) *250000*

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 8 OF 10			
<input type="checkbox"/> 21a	<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"/> 29

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NAME OF COMMITTEE (In Full)
Campaign for U.S. Reform Political Action Committee

Full Name (Last, First, Middle Initial) A. MICHAEL FOR CONGRESS		Date of Disbursement 08 30 2002
Mailing Address 215 LISBON ST.		Amount of Each Disbursement This Period 1 000 00
City LOWESVILLE	State MO	
Zip Code 64225		Category/Type 011
Purpose of Disbursement CONTRIBUTION OF SUPPORT		
Candidate Name MICHAEL MICHAEL		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: MO District: 02		

Full Name (Last, First, Middle Initial) B. NANCY PENNELL FOR CONGRESS		Date of Disbursement 09 25 2002
Mailing Address 235 AUNTCOMBAT STREET SUITE 610		Amount of Each Disbursement This Period 5 000 00
City SAN FRANCISCO	State CA	
Zip Code 94107		Category/Type 011
Purpose of Disbursement CONTRIBUTION OF SUPPORT		
Candidate Name NANCY PENNELL		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: CA District: 08		

Full Name (Last, First, Middle Initial) C. NANCY FOR CONGRESS		Date of Disbursement 09 25 2002
Mailing Address P.O. Box 597		Amount of Each Disbursement This Period 1 000 00
City AMES	State IA	
Zip Code 50010		Category/Type 011
Purpose of Disbursement CONTRIBUTION OF SUPPORT		
Candidate Name JOHN ROBERT NANCY		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: IA District: 04		

SUBTOTAL of Disbursements This Page (optional)	2 500 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"/> 21a	<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"/> 29

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NAME OF COMMITTEE (in Full)

CAMPAIN FOR U.S. REPRESENTATIVE PETERSON AUSTIN CARROLLSON

Full Name (Last, First, Middle Initial)

A. PEARCE FOR CONGRESS

Mailing Address: 22 GREEN BAY ROAD

City: WINNETKA State: IL Zip Code: 60093

Purpose of Disbursement: CONTRIBUTION OF SUPPORT Category/Type: 011

Candidate Name: HANK PEARCE

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: IL District: 10

Date of Disbursement

09 25 2002

Amount of Each Disbursement this Period

100000

Full Name (Last, First, Middle Initial)

B. ALEX SANDERS FOR U.S. SENATE

Mailing Address: P.O. Box 11703

City: COLUMBIA State: SC Zip Code: 29211

Purpose of Disbursement: CONTRIBUTION OF SUPPORT Category/Type: 011

Candidate Name: ALEXANDER SANDERS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: SC District:

Date of Disbursement

09 25 2002

Amount of Each Disbursement this Period

100000

Full Name (Last, First, Middle Initial)

C. KATRINA SWETT FOR CONGRESS

Mailing Address: P.O. Box 1937

City: BOON State: NH Zip Code: 03304

Purpose of Disbursement: CONTRIBUTION OF SUPPORT Category/Type: 011

Candidate Name: KATRINA SWETT

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: NH District: 02

Date of Disbursement

09 25 2002

Amount of Each Disbursement this Period

100000

SUBTOTAL of Disbursements (This Page (optional))

300000

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 13 OF 18	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 25a	<input type="checkbox"/> 28a	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (in full)
CAMPAIN FOR U.N. REPAIR POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. CUELLAR FOR CONGRESS		Date of Disbursement 08 25 2002
Mailing Address 1519 WASHINGTON ST. DTC. 2ND		Amount of Each Disbursement this Period 50000
City LAKEWOOD	State TX	
Zip Code 78040		Amount of Each Disbursement this Period 50000
Purpose of Disbursement CONTRIBUTION OF SUPPORT	Category/Type 011	
Candidate Name HENRY CUELLAR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): <input type="checkbox"/>	
State: TX District: 23		

Full Name (Last, First, Middle Initial) B. VOINOVICH FOR SENATE		Date of Disbursement 08 25 2002
Mailing Address 865 MASON AVE		Amount of Each Disbursement this Period 50000
City COLUMBUS	State OH	
Zip Code 43201		Amount of Each Disbursement this Period 50000 <i>CHQ# 0003/14/2002</i> 50000
Purpose of Disbursement CONTRIBUTION OF SUPPORT	Category/Type 011	
Candidate Name GEORGE VOINOVICH		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CONTRIBUTION OF SUPPORT	
State: OH District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	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 Other (specify): <input type="checkbox"/>	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	00000
TOTAL This Period (last page this box number only)	2570000

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

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

FOR LINE NUMBER: PAGE 1 OF 5
 (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)
 CAMPAIGN FOR U.S. REPUBLICAN POSITIVE ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 ROYCE, KEVIN

Date of Receipt
 07 01 2002

Mailing Address
 1544 NW Dixon St.

City
 CORVALLIS

State
 OR

Zip Code
 97330

FEC ID number of contributing federal political committee
 C

Amount of Each Receipt this Period
 50000

Name of Employer
 RETIRED

Occupation

Receipt For:
 Primary General Other (specify)

Aggregate Year-to-Date
 50000

B. Full Name (Last, First, Middle Initial)
 ROYCE, KEVIN

Date of Receipt
 07 01 2002

Mailing Address
 1544 NW Dixon St.

City
 CORVALLIS

State
 OR

Zip Code
 97330

FEC ID number of contributing federal political committee
 C

Amount of Each Receipt this Period
 10500

Name of Employer
 RETIRED

Occupation

Receipt For:
 Primary General Other (specify)

Aggregate Year-to-Date
 60000

C. Full Name (Last, First, Middle Initial)
 ROYCE, KEVIN

Date of Receipt
 08 01 2002

Mailing Address
 1544 NW Dixon St.

City
 CORVALLIS

State
 OR

Zip Code
 97330

FEC ID number of contributing federal political committee
 C

Amount of Each Receipt this Period
 10000

Name of Employer
 RETIRED

Occupation

Receipt For:
 Primary General Other (specify)

Aggregate Year-to-Date
 70000

SUBTOTAL of Receipts This Page (optional) ▶ 70000

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 2 OF 3
	<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)
 Campaign for U.S. Reform Political Action Committee

Full Name (Last, First, Middle Initial) A. <u>RUTER, KEVIN</u>		Date of Receipt <u>08 30 2022</u>
Mailing Address <u>1574 NW Dixon St.</u>		Amount of Each Receipt this Period <u>10000</u>
City <u>COVINGTON</u>	State <u>LA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer <u>RETIRED</u>	Occupation	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>50000</u>	

Full Name (Last, First, Middle Initial) B. <u>SHAW, RAY</u>		Date of Receipt <u>08 30 2022</u>
Mailing Address <u>501 S. MILLER AVE.</u>		Amount of Each Receipt this Period <u>100000</u>
City <u>LAFAYETTE</u>	State <u>CO</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer <u>SELF EMPLOYED</u>	Occupation <u>ARTIST / LECTURER</u>	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>200000</u>	

Full Name (Last, First, Middle Initial) C. <u>SHAW, RAY</u>		Date of Receipt <u>09 27 2022</u>
Mailing Address <u>501 S. MILLER AVE.</u>		Amount of Each Receipt this Period <u>100000</u>
City <u>LAFAYETTE</u>	State <u>CO</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer <u>SELF EMPLOYED</u>	Occupation <u>ARTIST / LECTURER</u>	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>300000</u>	

SUBTOTAL of Receipts This Page (optional)	<u>210000</u>
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 1 OF 3	
<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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COMMITTEE FOR U.S. RETURN POWERS ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. SHORE, RAY		Date of Receipt 09 27 2002
Mailing Address 501 S. MILLER AVE.		Amount of Each Receipt this Period 500.00
City LAFAYETTE	State CO	
Zip Code 80022		Amount of Each Receipt this Period 3500.00
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation AVIATOR / LOGPILOT	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 3500.00	

Full Name (Last, First, Middle Initial) B. RONDS, KENNETH		Date of Receipt 09 30 2002
Mailing Address 1544 NW BROWN ST.		Amount of Each Receipt this Period 350.00
City CORVALLIS	State OR	
Zip Code 97330		Amount of Each Receipt this Period 1150.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation	
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 1150.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date	

SUBTOTAL of Receipts This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	3650.00

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

Use separate schedules
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:
 (check only one)

PAGE 1 OF 3

21b 22 23 24 25
 26 27 28a 28b 28c 29

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NAME OF COMMITTEE (in Full)

CAMPAIGN FOR VINT. REFORM POLITICAL ACTION COMMITTEE C 00093992

Full Name (Last, First, Middle Initial)

A. BARBARA LEO ANN CONROSE

Date of Disbursement

07/01/2002

Mailing Address

1736 FARMER ST. SUITE 500

City

OAKLAND

State

CA

Zip Code

94612

Purpose of Disbursement

EMPLOYED BY REIMB. RATION VIA CONT. CHECK

011
 Category/Type

Candidate Name

BARBARA LEO

Office Sought

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: CA

District: 09

Amount of Each Disbursement this Period

0.00

Full Name (Last, First, Middle Initial)

B. DAVID WU ANN CONROSE

Date of Disbursement

07/01/2002

Mailing Address

818 SW 3RD AVE. Box 1182

City

PORTLAND

State

OR

Zip Code

97204

Purpose of Disbursement

EMPLOYED BY REIMB. RATION VIA CONT. CHECK

011
 Category/Type

Candidate Name

DAVID WU

Office Sought

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: OR

District: 01

Amount of Each Disbursement this Period

0.00

Full Name (Last, First, Middle Initial)

C. EARL PUMPHREY ANN CONROSE

Date of Disbursement

08/01/2002

Mailing Address

905 ENT INTUITIVE AVE.

City

BISMARCK

State

ND

Zip Code

58502

Purpose of Disbursement

EMPLOYED BY REIMB. RATION VIA CONT. CHECK

011
 Category/Type

Candidate Name

Office Sought

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: ND

District: 01

Amount of Each Disbursement this Period

0.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

7 - DISBURSEMENTS REPORT COVERING PERIOD FROM 7/1/02 TO 9/30/02

FOR LINE NUMBER: (check only one)
 21a 22 23 24 25
 26 27 28a 28b 29

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NAME OF COMMITTEE (in Full)
 COMMITTEE FOR U.N. RETURN POLITICAL ACTION COMMITTEE C 00043992

A. HOOKEY FOR CONGRESS
 Date of Disbursement: 08 30 2002
 Amount of Each Disbursement this Period: 10000

Full Name (Last, First, Middle Initial):
 Mailing Address: 220 14th St.
 City: DRESSER CITY State: OR Zip Code: 97021

Purpose of Disbursement: EXPENSES BY REUNIT ROUTE VIA CONF. CHECK
 Candidate Name: DANALYN HOOKEY
 Category/Type: 011

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: OR District: 01

B. MATSUOKA FOR CONGRESS
 Date of Disbursement: 07 30 2002
 Amount of Each Disbursement this Period: 100000

Full Name (Last, First, Middle Initial):
 Mailing Address: 211 JEFFERSON ST.
 City: FT. COLLINS State: CO Zip Code: 80524

Purpose of Disbursement: EXPENSES BY RAY SHIRT VIA CONF. CHECK
 Candidate Name: STAN MATSUOKA
 Category/Type: 011

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: CO District: 04

C. STARRINGTON FOR CONGRESS
 Date of Disbursement: 09 27 2002
 Amount of Each Disbursement this Period: 100000

Full Name (Last, First, Middle Initial):
 Mailing Address: 301 E. 57th Ave. Suite E
 City: DENVER State: CO Zip Code: 80212

Purpose of Disbursement: EXPENSES BY RAY SHIRT VIA CONF. CHECK
 Candidate Name: THOMAS LEW STARRINGTON
 Category/Type: 011

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: CO District:

SUBTOTAL of Disbursements This Page (optional): 210000
 TOTAL This Period (last page this line number only):

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

To accompany report covering period from 7/1/02 to 9/30/02

Use separate schedule(s) for each category at the Discard Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29

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NAME OF COMMITTEE (in full)

COMMITTEE FOR U.S. HOUSE POLITICAL ACTION COMMITTEE C 00043972

Full Name (Last, First, Middle Initial)

A. FERRY FOR CONGRESS

Date of Disbursement

07 27 2002

Mailing Address

P.O. Box 28122?

City

LAKWOOD

State CO

Zip Code 80228

Amount of Each Disbursement this Period

50000

Purpose of Disbursement

STATIONERY BY FAX SENT VIA CONF. EMAIL

011

Candidate Name

MIKE FERRY

Category/Type

Office Sought:

X House, Senate, President

Disbursement For:

Primary, X General, Other (specify)

State: CO

District: 07

Full Name (Last, First, Middle Initial)

B. HANK PERATT FOR CONGRESS

Date of Disbursement

07 30 2002

Mailing Address

22 GRAY BAY ROAD

City

WINNETKA

State IL

Zip Code 60093

Amount of Each Disbursement this Period

35000

Purpose of Disbursement

STATIONERY BY KERRY RENOY VIA CONF. EMAIL

011

Candidate Name

HANK PERATT

Category/Type

Office Sought:

X House, Senate, President

Disbursement For:

Primary, X General, Other (specify)

State: IL

District: 10

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House, Senate, President

Disbursement For:

Primary, General, Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional)

85000



TOTAL This Period (last page this line number only)

365000

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
	
PREPARED	DATE PREPARED

2004 RELEASE UNDER E.O. 14176