

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
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

ADDRESS (number and street) 1 Massachusetts Avenue, NW
Suite 310
 Check if different than previously reported. (ACC)
WASHINGTON DC 20001

2. **FEC IDENTIFICATION NUMBER** C00163048
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 01 01 2010 through 03 31 2010

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 Catherine Hoskins

Signature of Treasurer Electronically Filed by Catherine Hoskins Date 04 06 2010

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

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

A. Form/Schedule : **F3XN**

Transaction ID :

The unitemized cash receipts are funds that are federally permissible. They are collected at our large events where donors give their pocket change to support the efforts of our PAC. No individual gives \$50 or more. The average individual donation ranges from \$.01 to \$10.00.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

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		36952.93
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	36952.93									
(c) Total Receipts (from Line 19)	77224.08	77224.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	114177.01	114177.01								
7. Total Disbursements (from Line 31)	81524.28	81524.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32652.73	32652.73								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	16114.74	16114.74
(ii) Unitemized	51109.34	51109.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)	67224.08	67224.08
(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)	67224.08	67224.08
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	10000.00	10000.00
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))	77224.08	77224.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	77224.08	77224.08

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.....	71000.00	71000.00
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.....	10000.00	10000.00
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.....	524.28	524.28
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))..	81524.28	81524.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	81524.28	81524.28

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)	67224.08	67224.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	67224.08	67224.08
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: (check only one)	PAGE 7 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Carol Ammons		Date of Receipt	
	Mailing Address 1360 Hopewell Road		M M / D D / Y Y Y Y 03 / 04 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.10990
	Kenefic	OK	74748	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		20.00		
Name of Employer Big Five Community Services		Occupation Executive Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 219.00		

B.	Full Name (Last, First, Middle Initial) Gene Brady		Date of Receipt	
	Mailing Address 11 Nuangola Avenue		M M / D D / Y Y Y Y 03 / 04 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.10910
	Lake Nuangola	PA	18707	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		100.00		
Name of Employer Commission on Economic Opportunity		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 299.00		

C.	Full Name (Last, First, Middle Initial) Charles Braithwait		Date of Receipt	
	Mailing Address 5855 NE Highway C		M M / D D / Y Y Y Y 03 / 04 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.10811
	Lowry City	MO	64763	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		500.00		
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	620.00
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 8 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) David Brightbill		Date of Receipt
	Mailing Address 347 Main Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lower Salem	OH	45745
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10636
Name of Employer Washington-Morgan Counties CAP		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 250.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) David Brightbill		Date of Receipt
	Mailing Address 347 Main Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lower Salem	OH	45745
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10912
Name of Employer Washington-Morgan Counties CAP		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 350.00	<input type="text"/> 100.00

C.	Full Name (Last, First, Middle Initial) David Brightbill		Date of Receipt
	Mailing Address 347 Main Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lower Salem	OH	45745
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10931
Name of Employer Washington-Morgan Counties CAP		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 400.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Kerrie Carte		Date of Receipt																					
	Mailing Address 2640 S SR 19		<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		1	0		2	0	1	0														
	City State Zip Code Oak Harbor OH 43449		Transaction ID: SA11AI.10719																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 194.32																						
Name of Employer WSOS Occupation Executive Staff		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
		Aggregate Year-to-Date ▼ 393.32																						

B.	Full Name (Last, First, Middle Initial) Gayle Cunningham		Date of Receipt																					
	Mailing Address 284 Huntington Parc Road		<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>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		2	6		2	0	1	0														
	City State Zip Code Birmingham AL 35226-1900		Transaction ID: SA11AI.10606																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 388.94																						
Name of Employer Jefferson County CEO Occupation Executive Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
		Aggregate Year-to-Date ▼ 488.94																						

C.	Full Name (Last, First, Middle Initial) Lorraine Daniels		Date of Receipt																					
	Mailing Address 2044 Whippoorwill Way		<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>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	4		2	0	1	0														
	City State Zip Code Conyers GA 30094		Transaction ID: SA11AI.10928																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																						
Name of Employer Georgia Community Action Assn Occupation Executive Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
		Aggregate Year-to-Date ▼ 249.00																						

SUBTOTAL of Receipts This Page (optional)	▶	633.26
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 10 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Paul Dole		Date of Receipt
	Mailing Address 600 Engineer Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 3 / 2 0 1 0
	City	State	Zip Code
	Corbin	KY	40701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10786
Name of Employer KCEOC		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.00	199.00

B.	Full Name (Last, First, Middle Initial) John Drew		Date of Receipt
	Mailing Address 35 Vine Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 0 4 / 2 0 1 0
	City	State	Zip Code
	Winchester	MA	01890-1952
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10812
Name of Employer ABCD		Occupation President/CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	500.00

C.	Full Name (Last, First, Middle Initial) Jill Edwards-Sutton		Date of Receipt
	Mailing Address 8500 Chippewa Trail		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 1 1 / 2 0 1 0
	City	State	Zip Code
	Mt. Pleasant	MI	48858
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10584
Name of Employer Mid-Michigan Community Action		Occupation Child & Family Svcs. Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	500.00

SUBTOTAL of Receipts This Page (optional)	1199.00
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 11 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Charles Emmons		Date of Receipt MM / DD / YYYY 01 / 05 / 2010		
	Mailing Address 7209 Horseshoe Court		Transaction ID: SA11AI.10555		
	City Quinton	State VA	Zip Code 23141	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Virginia Community Action Assn		Occupation Board Member		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Adrian Fassett		Date of Receipt MM / DD / YYYY 01 / 27 / 2010		
	Mailing Address 275 Swan Lake Drive		Transaction ID: SA11AI.10705		
	City Patchogue	State NY	Zip Code 11772	Amount of Each Receipt this Period 400.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Economic Opportunity Council of Suffolk		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

C.	Full Name (Last, First, Middle Initial) Robert Garbo		Date of Receipt MM / DD / YYYY 03 / 04 / 2010		
	Mailing Address 18976 Red Dog Road		Transaction ID: SA11AI.10888		
	City Glouster	State OH	Zip Code 47532	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Hocking-Athens-Perry CAA		Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 349.00			

SUBTOTAL of Receipts This Page (optional)	▶	800.00
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 12 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Donald Gossett	Date of Receipt MM / DD / YYYY 01 / 27 / 2010
	Mailing Address 105 Sundown Road	Transaction ID: SA11AI.10706
	City State Zip Code Grayson KY 41143	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ironton-Lawrence County Area C Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Denise Harlow	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 69 Trinity Place Apt. 401	Transaction ID: SA11AI.10984
	City State Zip Code Albany NY 12202	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NYSCAA Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 219.32	

C.	Full Name (Last, First, Middle Initial) Nancy Isserlis	Date of Receipt MM / DD / YYYY 02 / 02 / 2010
	Mailing Address 708 W. 23rd Avenue	Transaction ID: SA11AI.10723
	City State Zip Code Spokane WA 99203	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Spokane Neighborhood Programs Occupation Board Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	735.00
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 13 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A. Full Name (Last, First, Middle Initial)
Kent Keys

Mailing Address 1236 Cherry Street

City State Zip Code
Grand Forks ND 58201

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

Name of Employer Red River Valley Community Action, Inc Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.10689

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Rosemary Lavagnino

Mailing Address 777 Boulevard East

City State Zip Code
Weehawken NJ 07086

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

Name of Employer North Hudson CAC Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.10909

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Don Mathis

Mailing Address 305 Tidewater Drive

City State Zip Code
Havre de Grace MD 21078

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

Name of Employer Community Action Partners-hip Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.10610

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 14 / 36
(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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial)
Charles McCann

Mailing Address P.O. Box 1103

City State Zip Code
St. Joseph MO 64502

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

Name of Employer
Economic Development Institute

Occupation
Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2010

Transaction ID: SA11AI.10757

Amount of Each Receipt this Period
199.00

B.

Full Name (Last, First, Middle Initial)
B. Wayne McLaughlin

Mailing Address 1055 Edgewood Drive

City State Zip Code
Chillicothe OH 45601

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

Name of Employer
Ross County Community Action

Occupation
Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2010

Transaction ID: SA11AI.10634

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Andrew Mello

Mailing Address 15 Brackett Avenue

City State Zip Code
Tiverton RI 02878

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

Name of Employer
Rhode Island Community Action

Occupation
Executive Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2010

Transaction ID: SA11AI.10810

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **499.00**

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 15 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Jerralynn Ness		Date of Receipt
	Mailing Address 9865 NW Kaiser Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2010
	City	State	Zip Code
	Portland	OR	97231
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10903
Name of Employer Community Action Organization		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.32	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) James Norman		Date of Receipt
	Mailing Address 103 Rosebud Trail		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2010
	City	State	Zip Code
	Webster	NY	14580
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10873
Name of Employer Action for a Better Community		Occupation President/CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 398.00	<input type="text"/> 199.00

C.	Full Name (Last, First, Middle Initial) Alvin Norris		Date of Receipt
	Mailing Address 4217 Bardwell Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2010
	City	State	Zip Code
	Mt. Orab	OH	45154
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10929
Name of Employer Adams-Brown Economic Oppty		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 349.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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 16 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Alvin Norris		Date of Receipt
	Mailing Address 4217 Bardwell Road		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mt. Orab	OH	45154
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10985
Name of Employer Adams-Brown Economic Oppty		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="270.00"/>	

B.	Full Name (Last, First, Middle Initial) Alvin Norris		Date of Receipt
	Mailing Address 4217 Bardwell Road		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mt. Orab	OH	45154
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10993
Name of Employer Adams-Brown Economic Oppty		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="290.00"/>	

C.	Full Name (Last, First, Middle Initial) Alvin Norris		Date of Receipt
	Mailing Address 4217 Bardwell Road		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Mt. Orab	OH	45154
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10999
Name of Employer Adams-Brown Economic Oppty		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="310.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 17 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Bill Powell	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 1431 Cactus Drive	Transaction ID: SA11AI.10892
	City State Zip Code Levelland TX 79336	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation South Plains CAA Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.00	

B.	Full Name (Last, First, Middle Initial) Douglas Rauthe	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 413 Sixth Avenue East	Transaction ID: SA11AI.10932
	City State Zip Code Kalispell MT 59901	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CAP of NW MT HRDC District X Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	

C.	Full Name (Last, First, Middle Initial) Tom Reed	Date of Receipt MM / DD / YYYY 01 / 27 / 2010
	Mailing Address 141 Mulberry Avenue	Transaction ID: SA11AI.10653
	City State Zip Code Pomeroy OH 45769	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Gallia-Meigs CAP Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
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 18 / 36
(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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial) Tom Reed		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 141 Mulberry Avenue		Transaction ID: SA11AI.10913
City Pomeroy	State OH	Zip Code 45769
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Gallia-Meigs CAP	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

B.

Full Name (Last, First, Middle Initial) Tom Reed		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 141 Mulberry Avenue		Transaction ID: SA11AI.10934
City Pomeroy	State OH	Zip Code 45769
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gallia-Meigs CAP	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.00	

C.

Full Name (Last, First, Middle Initial) Tom Reed		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 141 Mulberry Avenue		Transaction ID: SA11AI.10952
City Pomeroy	State OH	Zip Code 45769
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gallia-Meigs CAP	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.00	

SUBTOTAL of Receipts This Page (optional)	200.00
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 19 / 36
	<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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) Jeanett Riley		Date of Receipt MM / DD / YYYY 01 / 22 / 2010		
	Mailing Address P.O. Box 893		Transaction ID: SA11AI.10625		
	City Muskegon	State MI	Zip Code 49443	Amount of Each Receipt this Period 597.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 597.00		
	Name of Employer Muskegon Oceana CAP		Occupation Executive Staff		

B.	Full Name (Last, First, Middle Initial) Ray Roberts		Date of Receipt MM / DD / YYYY 01 / 27 / 2010		
	Mailing Address 104 4th Street P.O. Box 609		Transaction ID: SA11AI.10704		
	City Piketon	State OH	Zip Code 45661	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
	Name of Employer CAC of Pike County		Occupation Executive Director		

C.	Full Name (Last, First, Middle Initial) Gerry Spencer		Date of Receipt MM / DD / YYYY 01 / 27 / 2010		
	Mailing Address 2885 Pleasant Ridge Road		Transaction ID: SA11AI.10632		
	City Marietta	State OH	Zip Code 45750	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 249.00		
	Name of Employer Washington-Morgan Counties CAP		Occupation Board Member		

SUBTOTAL of Receipts This Page (optional)	897.00
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 20 / 36
(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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial) Gerry Spencer		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 2885 Pleasant Ridge Road		Transaction ID: SA11AI.10911
City Marietta	State OH	Zip Code 45750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Washington-Morgan Counties CAP	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.00	

B.

Full Name (Last, First, Middle Initial) Gerry Spencer		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 2885 Pleasant Ridge Road		Transaction ID: SA11AI.10933
City Marietta	State OH	Zip Code 45750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Washington-Morgan Counties CAP	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

C.

Full Name (Last, First, Middle Initial) Gerry Spencer		Date of Receipt MM / DD / YYYY 03 / 18 / 2010
Mailing Address 2885 Pleasant Ridge Road		Transaction ID: SA11AI.11006
City Marietta	State OH	Zip Code 45750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Washington-Morgan Counties CAP	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.00	

SUBTOTAL of Receipts This Page (optional)	▶	350.00
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 21 / 36
(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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial)
Larry Stuckart

Mailing Address 4128 S. Garfield

City State Zip Code
Spokane WA 99203

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

Name of Employer
Spokane Neighborhood Action Programs

Occupation
Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2010

Transaction ID: SA11AI.10557

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Terry Tolbert

Mailing Address 2505 Nottingham Drive

City State Zip Code
Savannah GA 31406

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

Name of Employer
EOA for Savannah-Chatham Count

Occupation
Deputy Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2010

Transaction ID: SA11AI.10936

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Samuel Torrence

Mailing Address 5474 Northwood Drive

City State Zip Code
Center Valley PA 18034

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

Name of Employer
CACLV

Occupation
Executive Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2010

Transaction ID: SA11AI.10813

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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 22 / 36	
	(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"/> 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)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) cash unitemized		Date of Receipt	
	Mailing Address 1 Massachusetts Avenue, NW Suite 310		M M / D D / Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.11074
	Washington	DC	20001	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		7622.48	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7622.48		

SUBTOTAL of Receipts This Page (optional)	7622.48
TOTAL This Period (last page this line number only)	16114.74

**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 23 / 36
	<input 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 checked="" type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS DODD		Date of Receipt
	Mailing Address PO BOX 270701		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	WEST HARTFORD	CT	06127
	FEC ID number of contributing federal political committee.		Transaction ID: SA16.11070
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			refund of campaign contribution - no longer running for office

B.	Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS DODD		Date of Receipt
	Mailing Address PO BOX 270701		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	WEST HARTFORD	CT	06127
	FEC ID number of contributing federal political committee.		Transaction ID: SA16.11071
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			refund of campaign contribution - no longer running for office

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 10000.00
TOTAL This Period (last page this line number only)	<input type="text"/> 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)

<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

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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A. Full Name (Last, First, Middle Initial) A LOT OF PEOPLE FOR DAVE OBEY <hr/> Mailing Address P O Box 1322 PO BOX 1322 <hr/> City Wausau State WI Zip Code 54402 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11028 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
B. Full Name (Last, First, Middle Initial) A LOT OF PEOPLE FOR DAVE OBEY <hr/> Mailing Address P O Box 1322 PO BOX 1322 <hr/> City Wausau State WI Zip Code 54402 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11039 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
C. Full Name (Last, First, Middle Initial) A LOT OF PEOPLE FOR DAVE OBEY <hr/> Mailing Address P O Box 1322 PO BOX 1322 <hr/> City Wausau State WI Zip Code 54402 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11041 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) AMERICA WORKS PAC	Transaction ID: SB23.11024 Date of Disbursement 01 / 13 / 2010	
	Mailing Address PO Box 76187 Suite 800		
	City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	
B.	Full Name (Last, First, Middle Initial) BETTY PAC	Transaction ID: SB23.11022 Date of Disbursement 01 / 13 / 2010	
	Mailing Address PO BOX 14141		
	City ST PAUL State MN Zip Code 55114	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	
C.	Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS	Transaction ID: SB23.11047 Date of Disbursement 03 / 15 / 2010	
	Mailing Address PO Box 442		
	City Allentown State PA Zip Code 18105	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A. Full Name (Last, First, Middle Initial) GRASSLEY COMMITTEE <hr/> Mailing Address PO BOX 1000 <hr/> City DES MOINES State IA Zip Code 50304 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11049 Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) GUTHRIE FOR CONGRESS <hr/> Mailing Address PO Box 9639 <hr/> City Bowling Green State KY Zip Code 42102 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11036 Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) HOYER, STENY HAMILTON <hr/> Mailing Address 7905 MALCOLM ROAD SUITE 102 <hr/> City CLINTON State MD Zip Code 20735 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11034 Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) JESSE JACKSON JR FOR CONGRESS COMMITTEE	Transaction ID: SB23.11048 Date of Disbursement	<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>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	5		2	0	1	0														
	Mailing Address 7016 S. Euclid Avenue		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">1000.00</td> </tr> </table>	Amount of Each Disbursement this Period										1000.00									
Amount of Each Disbursement this Period																							
1000.00																							
	City Chicago State IL Zip Code 60649																						
	Purpose of Disbursement		<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																							
	Candidate Name																						
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						
B.	Full Name (Last, First, Middle Initial) JOHN CALLAHAN FOR CONGRESS	Transaction ID: SB23.11052 Date of Disbursement	<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>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	4		2	0	1	0														
	Mailing Address PO BOX 1386		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">2500.00</td> </tr> </table>	Amount of Each Disbursement this Period										2500.00									
Amount of Each Disbursement this Period																							
2500.00																							
	City BETHLEHEM State PA Zip Code 18017																						
	Purpose of Disbursement		<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																							
	Candidate Name																						
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						
C.	Full Name (Last, First, Middle Initial) JOHN CARNEY FOR CONGRESS	Transaction ID: SB23.11054 Date of Disbursement	<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>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	4		2	0	1	0														
	Mailing Address PO BOX 2162		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">2500.00</td> </tr> </table>	Amount of Each Disbursement this Period										2500.00									
Amount of Each Disbursement this Period																							
2500.00																							
	City WILMINGTON State DE Zip Code 19899																						
	Purpose of Disbursement		<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																							
	Candidate Name																						
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) JOHN LEWIS FOR CONGRESS	Transaction ID: SB23.11033 Date of Disbursement 03 / 01 / 2010	
	Mailing Address 303 Peachtree Street, NE Suite 5300		Amount of Each Disbursement this Period 5000.00
	City Atlanta State GA Zip Code 30308		
	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
B.	Full Name (Last, First, Middle Initial) JOHN SPRATT FOR CONGRESS COMMITTEE	Transaction ID: SB23.11035 Date of Disbursement 03 / 09 / 2010	
	Mailing Address POST OFFICE BOX 10986		Amount of Each Disbursement this Period 1500.00
	City ROCK HILL State SC Zip Code 29731		
	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
C.	Full Name (Last, First, Middle Initial) LEVIN FOR CONGRESS	Transaction ID: SB23.11056 Date of Disbursement 03 / 24 / 2010	
	Mailing Address PO Box 37		Amount of Each Disbursement this Period 1000.00
	City Roseville State MI Zip Code 48066		
	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

<p>A. Full Name (Last, First, Middle Initial) MARTHA COAKLEY FOR SENATE COMMITTEE</p> <p>Mailing Address 529 MAIN STREET</p> <p>City BOSTON State MA Zip Code 02129</p> <p>Purpose of Disbursement </p> <p>Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.11026 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <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>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	3		2	0	1	0													
2500.00																						
<p>B. Full Name (Last, First, Middle Initial) POMEROY, EARL RALPH</p> <p>Mailing Address Post Office Box 9336</p> <p>City BISMARCK State ND Zip Code 58502</p> <p>Purpose of Disbursement </p> <p>Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.11046 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <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>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	5		2	0	1	0													
2500.00																						
<p>C. Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS</p> <p>Mailing Address PO BOX 100</p> <p>City BATTLE CREEK State MI Zip Code 49016</p> <p>Purpose of Disbursement </p> <p>Candidate Name Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 07</p>	<p>Transaction ID: SB23.11045 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <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>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	5		2	0	1	0													
2500.00																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">7500.00</td></tr></table>	7500.00
7500.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table>	

**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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial)

DEBBIE STABENOW

Mailing Address 7143 STEEPLECHASE

City LANSING State MI Zip Code 48917

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.11031

Date of Disbursement

02 / 02 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.11037

Date of Disbursement

03 / 10 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.11042

Date of Disbursement

03 / 10 / 2010

Amount of Each Disbursement this Period

5000.00

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)

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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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A. Full Name (Last, First, Middle Initial) TOM PAC <hr/> Mailing Address PO BOX 752 <hr/> City DES MOINES State IA Zip Code 50303 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11051 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) VICTORY NOW PAC <hr/> Mailing Address 10605 Concord Street Suite 202 <hr/> City Kensington State MD Zip Code 20895 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11044 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

71000.00

**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 checked="" 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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.	Full Name (Last, First, Middle Initial) David Bradley	Transaction ID: SB26.11021 Date of Disbursement 01 / 04 / 2010
	Mailing Address 1 Rosecroft Drive	Amount of Each Disbursement this Period 5000.00
	City Fredericksburg State VA Zip Code 22407	
	Purpose of Disbursement loan repayment	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Nancy Bradley	Transaction ID: SB26.11018 Date of Disbursement 01 / 04 / 2010
	Mailing Address 1 Rosecroft Drive	Amount of Each Disbursement this Period 5000.00
	City Fredericksburg State VA Zip Code 22407	
	Purpose of Disbursement loan repayment	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

A.

Full Name (Last, First, Middle Initial)

Bank of America, N.A.

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement
Bank transaction fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.11078

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

524.28

SUBTOTAL of Disbursements This Page (optional)

524.28

TOTAL This Period (last page this line number only)

524.28

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)

CAP-PAC separate segregated fund of National Community Action Foundation, Inc.

Transaction ID: SC/10.10411

LOAN SOURCE Full Name (Last, First, Middle Initial)
Nancy Bradley

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 1 Rosecroft Drive

City Fredericksburg State VA ZIP Code 22407

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	5000.00	0.00

TERMS

Date Incurred: MM DD YY YY 12 01 2009
Date Due: 12/1/10
Interest Rate: 0.0000 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.