

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
Automotive Free International Trade PAC

ADDRESS (number and street) 1625 Prince St.
 Check if different than previously reported. (ACC)
Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00250399
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 2008 through 01 31 2008

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

Type or Print Name of Treasurer Jack Taylor

Signature of Treasurer Electronically Filed by Jack Taylor Date 02 20 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Automotive Free International Trade PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		380711.34
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	380711.34									
(c) Total Receipts (from Line 19)	25718.56	25718.56								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	406429.90	406429.90								
7. Total Disbursements (from Line 31)	65004.53	65004.53								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	341425.37	341425.37								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Automotive Free International Trade PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	25100.00	25100.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	25100.00	25100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	25100.00	25100.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	618.56	618.56
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))	25718.56	25718.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25718.56	25718.56

DETAILED SUMMARY PAGE

of Disbursements

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.....	65004.53	65004.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	65004.53	65004.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	65004.53	65004.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65004.53	65004.53

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	25100.00	25100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25100.00	25100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65004.53	65004.53
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	65004.53	65004.53

**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 / 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) George T. Albrecht	Date of Receipt MM / DD / YYYY 01 / 30 / 2008
	Mailing Address 180 Beacon Street	Transaction ID: C388302
	City State Zip Code Boston MA 02116	Amount of Each Receipt this Period 1250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Woburn Foreign Motors President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) Peter Blackstock	Date of Receipt MM / DD / YYYY 01 / 04 / 2008
	Mailing Address P.O. Box 369	Transaction ID: C375938
	City State Zip Code Pebble Beach CA 93953	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Lexus of Monterey Peninsula Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Allen Courter	Date of Receipt MM / DD / YYYY 01 / 30 / 2008
	Mailing Address 13570 Main Street	Transaction ID: C388303
	City State Zip Code Bellevue WA 98005	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Honda Auto Center of Bellevue Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 31
	<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)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Michael Dever	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 8500 Summerhouse Road	Transaction ID: C387605
	City State Zip Code Cincinnati OH 45243	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Automanage, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 5000.00	

B.	Full Name (Last, First, Middle Initial) Derek Gentry	Date of Receipt MM / DD / YYYY 01 / 21 / 2008
	Mailing Address 164 E. Cielo Grande Avenue	Transaction ID: C389691
	City State Zip Code Phoenix AZ 85024	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer ESharp Services Occupation Programmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 350.00	

C.	Full Name (Last, First, Middle Initial) Derek Gentry	Date of Receipt MM / DD / YYYY 01 / 31 / 2008
	Mailing Address 164 E. Cielo Grande Avenue	Transaction ID: C391293
	City State Zip Code Phoenix AZ 85024	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer ESharp Services Occupation Programmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional)	5350.00
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 / 31
	<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)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Arthur Kelly		Date of Receipt MM / DD / YYYY 01 / 17 / 2008		
	Mailing Address 46 Horseshoe Lane		Transaction ID: C379865		
	City LeMont	State IL	Zip Code 60439	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Kelly Nissan	Occupation President			
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) Robert LeMieux		Date of Receipt MM / DD / YYYY 01 / 03 / 2008		
	Mailing Address 1115 Roscoe Street		Transaction ID: C375465		
	City Green Bay	State WI	Zip Code 54304	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LeMieux & Son Toyota	Occupation Owner & General Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) Frank Tzu Hsu Lin		Date of Receipt MM / DD / YYYY 01 / 17 / 2008		
	Mailing Address 1138 W Main Street		Transaction ID: C379866		
	City Alhambra	State CA	Zip Code 91801	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer New Century BMW	Occupation Dealer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 31	
	(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)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Lee Maas		Date of Receipt MM / DD / YYYY 01 / 22 / 2008	
	Mailing Address 13727 Creekside Place		Transaction ID: C387487	
	City	State	Zip Code	Amount of Each Receipt this Period
	Dallas	TX	75240	5000.00
	FEC ID number of contributing federal political committee. C			
	Name of Employer Classic BMW		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

B.	Full Name (Last, First, Middle Initial) Joseph James Perillo, Sr.		Date of Receipt MM / DD / YYYY 01 / 22 / 2008	
	Mailing Address 1111 W Diversey Pkwy		Transaction ID: C387452	
	City	State	Zip Code	Amount of Each Receipt this Period
	Chicago	IL	60614-1399	1000.00
	FEC ID number of contributing federal political committee. C			
	Name of Employer Perillo BMW		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	25100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 31
(check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.

Full Name (Last, First, Middle Initial)
Merrill Lynch

Mailing Address 1850 K Street, NW
7th Floor

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
618.56

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: C390164

Amount of Each Receipt this Period
618.56

SUBTOTAL of Receipts This Page (optional)	▶	618.56
TOTAL This Period (last page this line number only)	▶	618.56

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D60030 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card fee	<input type="text" value="5.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D60031 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card fee	<input type="text" value="1621.74"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Society for Industrial Security	Transaction ID: D59859 Date of Disbursement
	Mailing Address c/o Trimark Corporation 6231 Leesburg Pike, Suite100	<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Falls Church State VA Zip Code 22044	Amount of Each Disbursement this Period
	Purpose of Disbursement rent	<input type="text" value="2982.58"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4610.27"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: D60029 Date of Disbursement 01 / 03 / 2008
	Mailing Address 915 South 500 East Suite200	Amount of Each Disbursement this Period 26.50
	City American Fork State UT Zip Code 84003	
	Purpose of Disbursement credit card fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BB&T Insurance Services	Transaction ID: D56995 Date of Disbursement 01 / 04 / 2008
	Mailing Address 3275 Fair Ridge Dr,	Amount of Each Disbursement this Period 3000.00
	City Fairfax State VA Zip Code	
	Purpose of Disbursement insurance premium	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BB&T Insurance Services	Transaction ID: D57134 Date of Disbursement 01 / 11 / 2008
	Mailing Address 3275 Fair Ridge Dr,	Amount of Each Disbursement this Period 265.00
	City Fairfax State VA Zip Code	
	Purpose of Disbursement insurance premium	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	3291.50
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) BB&T Insurance Services	Transaction ID: D57227 Date of Disbursement
	Mailing Address 3275 Fair Ridge Dr,	<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Fairfax State VA Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement insurance premium	<input type="text" value="151.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bernadette Cala	Transaction ID: D57138 Date of Disbursement
	Mailing Address 1625 Prince Street Suite 225	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<input type="text" value="1604.69"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bernadette Cala	Transaction ID: D59901 Date of Disbursement
	Mailing Address 1625 Prince Street Suite 225	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<input type="text" value="1604.69"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3360.38"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Peter Blackstock Mailing Address P.O. Box 369 City Pebble Beach State CA Zip Code 93953 Purpose of Disbursement long distance/postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57010 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Boyarsky, Silbert, Silverman, Vas & Pasternak Mailing Address 6151 Executive Boulevard City Rockville State MD Zip Code 20852 Purpose of Disbursement accounting retainer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57081 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Buzzard's Nest Mailing Address 9514 Main Street City Manassas State VA Zip Code 20110 Purpose of Disbursement printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D56992 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8	Amount of Each Disbursement this Period 559.00

SUBTOTAL of Disbursements This Page (optional)	1309.00
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 15 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A. Full Name (Last, First, Middle Initial) Capitol Advantage <hr/> Mailing Address P.O. Box 1223 <hr/> City McLean State VA Zip Code 22101 <hr/> Purpose of Disbursement computer software - annual renewal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D56994 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 6000.00
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 First Street, S.E. <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement meeting expense- dues, food Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D59845 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 101.65
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Petty Cash <hr/> Mailing Address 1625 Prince Street Suite 225 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement replenish Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D59852 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6201.65
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

<p>A. Full Name (Last, First, Middle Initial) Commonwealth Copiers</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166</p> <p>Purpose of Disbursement office equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D59853</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.42"/></p>
<p>B. Full Name (Last, First, Middle Initial) Allen Courter</p> <p>Mailing Address 13570 Main Street</p> <p>City Bellevue State WA Zip Code 98005</p> <p>Purpose of Disbursement long distance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57080</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Michael Dever</p> <p>Mailing Address 8500 Summerhouse Road</p> <p>City Cincinnati State OH Zip Code 45243</p> <p>Purpose of Disbursement long distance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57078</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="320.42"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

<p>A. Full Name (Last, First, Middle Initial) FedEx Corporation</p> <p>Mailing Address P.O. Box 1140 Department A</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement express shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57228</p> <p>Date of Disbursement 01 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 2169.92</p>
<p>B. Full Name (Last, First, Middle Initial) GF Pension</p> <p>Mailing Address 60 West Broad Street Suite 302</p> <p>City Bethlehem State PA Zip Code 18018</p> <p>Purpose of Disbursement quarterly fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57013</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 731.50</p>
<p>C. Full Name (Last, First, Middle Initial) GreatAmerica Leasing Corp.</p> <p>Mailing Address 8742 Innovation Way</p> <p>City Chicago State IL Zip Code 60682-0087</p> <p>Purpose of Disbursement office equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57085</p> <p>Date of Disbursement 01 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 194.99</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3096.41

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 18 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

<p>A. Full Name (Last, First, Middle Initial) Mary Dreape Hanagan</p> <p>Mailing Address 1625 Prince Street Suite 225</p> <p>City Alexandria State VA Zip Code 22314-2825</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57140</p> <p>Date of Disbursement 01 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2890.74</p>
<p>B. Full Name (Last, First, Middle Initial) Mary Dreape Hanagan</p> <p>Mailing Address 1625 Prince Street Suite 225</p> <p>City Alexandria State VA Zip Code 22314-2825</p> <p>Purpose of Disbursement payroll bonus</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57016</p> <p>Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1539.92</p>
<p>C. Full Name (Last, First, Middle Initial) Mary Dreape Hanagan</p> <p>Mailing Address 1625 Prince Street Suite 225</p> <p>City Alexandria State VA Zip Code 22314-2825</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D59904</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 3386.12</p>

SUBTOTAL of Disbursements This Page (optional)	7816.78
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Fritz Hitchcock Mailing Address Capistrano Shores 1880 N. El Camino Real #78 City San Clemente State CA Zip Code 92672 Purpose of Disbursement long distance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57001 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 76.00
B.	Full Name (Last, First, Middle Initial) Bradley Hoffman Mailing Address 20 Deer Ridge Road City Avon State CT Zip Code 06001 Purpose of Disbursement long distance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57012 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 50.00
C.	Full Name (Last, First, Middle Initial) Lawrence Kull Mailing Address 3 Bradford Court City Medford State NJ Zip Code 08055 Purpose of Disbursement long distance/mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57009 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional) ▶	226.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Lincoln Financial	Transaction ID: D57014 Date of Disbursement 01 / 04 / 2008
	Mailing Address att: Group Net Processing P.O. Box 2248	Amount of Each Disbursement this Period 15582.95
	City Fort Wayne State IN Zip Code 46801-2248	
	Purpose of Disbursement 401K contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Lincoln Financial	Transaction ID: D60032 Date of Disbursement 01 / 04 / 2008
	Mailing Address att: Group Net Processing P.O. Box 2248	Amount of Each Disbursement this Period 469.36
	City Fort Wayne State IN Zip Code 46801-2248	
	Purpose of Disbursement 401k contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Lincoln Financial	Transaction ID: D60033 Date of Disbursement 01 / 08 / 2008
	Mailing Address att: Group Net Processing P.O. Box 2248	Amount of Each Disbursement this Period 207.95
	City Fort Wayne State IN Zip Code 46801-2248	
	Purpose of Disbursement 401k contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	16260.26
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Lisa Emig	Transaction ID: D59902 Date of Disbursement 01 / 31 / 2008
	Mailing Address 1625 Prince Street Suite 225	Amount of Each Disbursement this Period 1283.02
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lisa Emig	Transaction ID: D57015 Date of Disbursement 01 / 04 / 2008
	Mailing Address 1625 Prince Street Suite 225	Amount of Each Disbursement this Period 1179.09
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement payroll bonus Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lisa Emig	Transaction ID: D57139 Date of Disbursement 01 / 15 / 2008
	Mailing Address 1625 Prince Street Suite 225	Amount of Each Disbursement this Period 1282.95
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3745.06
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Lee Maas Mailing Address 13727 Creekside Place City Dallas State TX Zip Code 75240 Purpose of Disbursement airfare/long distance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57000 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8	Amount of Each Disbursement this Period 680.80
B.	Full Name (Last, First, Middle Initial) MassMutual Life Insurance Company Mailing Address Retirement Matters Accumulation Pr City Springfield State MA Zip Code 01111-0001 Purpose of Disbursement insurance premium Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D60036 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8	Amount of Each Disbursement this Period 183.84
C.	Full Name (Last, First, Middle Initial) Merrill Lynch Mailing Address 1850 K Street, NW 7th Floor City Washington State DC Zip Code 20006 Purpose of Disbursement wire transfer fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D60066 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8	Amount of Each Disbursement this Period 30.00

SUBTOTAL of Disbursements This Page (optional)		894.64	
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 23 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Minuteman Press	Transaction ID: D59844 Date of Disbursement
	Mailing Address 4001 North 9th Street Suite 102	<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period
	Purpose of Disbursement printing	<input type="text" value="22.34"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jim Norton	Transaction ID: D57007 Date of Disbursement
	Mailing Address 3020 S. Yorktown	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Tulsa State OK Zip Code 74114	Amount of Each Disbursement this Period
	Purpose of Disbursement long distance	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NOVA Information Systems	Transaction ID: D60027 Date of Disbursement
	Mailing Address One Concourse Parkway Suite 300	<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card fee	<input type="text" value="923.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="995.40"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D60035 Date of Disbursement 01 / 10 / 2008
	Mailing Address P.O. Box 2950	
	City Merrifield State VA Zip Code 22116-2950	Amount of Each Disbursement this Period 184.01
	Purpose of Disbursement payroll fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PowerPay	Transaction ID: D60028 Date of Disbursement 01 / 03 / 2008
	Mailing Address 5 Milk Street	
	City Portland State ME Zip Code 04101	Amount of Each Disbursement this Period 322.00
	Purpose of Disbursement credit card fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D59854 Date of Disbursement 01 / 25 / 2008
	Mailing Address Dept 85 - 0000084282 P.O. Box 30292	
	City Salt Lake City State UT Zip Code 84130-0292	Amount of Each Disbursement this Period 152.37
	Purpose of Disbursement office equipment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	658.38
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 25 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

<p>A. Full Name (Last, First, Middle Initial) John E. Taylor</p> <p>Mailing Address 3001 Edge Hill Drive</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement long distance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57079</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: right;"><input type="text" value="50.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Triangle Press, Inc.</p> <p>Mailing Address 6720 Allentown Blvd.</p> <p>City Harrisburg State PA Zip Code 17112</p> <p>Purpose of Disbursement printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57082</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: right;"><input type="text" value="1138.60"/></p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 17398</p> <p>City Baltimore State MD Zip Code 21297-0429</p> <p>Purpose of Disbursement cellular phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D56993</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: right;"><input type="text" value="109.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1297.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

<p>A. Full Name (Last, First, Middle Initial) Virginia Commerce Bank</p> <p>Mailing Address 1414 Prince Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement payroll withholding tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57017</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1510.47"/></p>
<p>B. Full Name (Last, First, Middle Initial) Virginia Commerce Bank</p> <p>Mailing Address 1414 Prince Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement payroll withholding tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D57141</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3754.69"/></p>
<p>C. Full Name (Last, First, Middle Initial) Virginia Commerce Bank</p> <p>Mailing Address 1414 Prince Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement payroll withholding tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D59911</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4084.20"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9349.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 27 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.	Full Name (Last, First, Middle Initial) Virginia Commerce Bank Mailing Address 1414 Prince Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement transfer fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D60034 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 8	Amount of Each Disbursement this Period 15.00
B.	Full Name (Last, First, Middle Initial) Wells Fargo Financial Leasing Mailing Address P.O. Box 6434 City Carol Stream State IL Zip Code 60197-6434 Purpose of Disbursement office equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D59846 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8	Amount of Each Disbursement this Period 208.95
C.	Full Name (Last, First, Middle Initial) XO Communications Services, Inc Mailing Address 14242 Collections Center Drive City Chicago State IL Zip Code 60693-0142 Purpose of Disbursement monthly phone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57086 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8	Amount of Each Disbursement this Period 551.79

SUBTOTAL of Disbursements This Page (optional) ▶

775.74

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 28 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A. Full Name (Last, First, Middle Initial) American Express Travel Mailing Address P.O. Box 650448 City Dallas State TX Zip Code 75268 Purpose of Disbursement credit card payment (see itemized) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57083 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 54.42 Category/Type

B. Full Name (Last, First, Middle Initial) B. Smith Restaurant Mailing Address 50 Massachusetts Ave., NE City Washington State DC Zip Code 20002 Purpose of Disbursement mtg exp. - food (see Am.Ex. Disburse) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D57084 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 54.42 Category/Type [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) American Express Travel Mailing Address P.O. Box 650448 City Dallas State TX Zip Code 75268 Purpose of Disbursement credit card payment (see itemized) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D59847 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 741.26 Category/Type

SUBTOTAL of Disbursements This Page (optional)	795.68
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 29 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

<p>A. Full Name (Last, First, Middle Initial) LaPorta's Restaurant</p> <p>Mailing Address 1600 Duke Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement mtg.exp. - food (see Am.Ex. disburse)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D59851 Date of Disbursement 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 57.17</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Pitney Bowes</p> <p>Mailing Address P.O. Box 85390</p> <p>City Louisville State KY Zip Code 40285-5390</p> <p>Purpose of Disbursement postage (see Am.Ex. disburse)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D59849 Date of Disbursement 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 44.09</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Roll Call</p> <p>Mailing Address 900 Second Street, N.E.</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement subscription (see Am.Ex. disburse)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D59848 Date of Disbursement 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 455.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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 30 / 31

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

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NAME OF COMMITTEE (In Full)
Automotive Free International Trade PAC

A.

Full Name (Last, First, Middle Initial)
The Hill

Mailing Address 733 15th Street, N.W.
Suite 1140

City Washington State DC Zip Code 20005

Purpose of Disbursement
subscription (see Am.Ex. disburse)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D59850

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

185.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65004.53

Image# 28930608909

Form/Schedule: **F3XN**

All expenditures detailed on line 21b are operating expenditures and are made on behalf of the committee itself and not on behalf of a candidate or another committee.

Transaction ID:

Form/Schedule: **SA11AI**

Contribution made on 12/31/2007

Transaction ID: **C375465**
