

# 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  
Northern Lights Political Action Committee

ADDRESS (number and street) PO Box 2566  
 Check if different than previously reported. (ACC)  
Washington DC 20013

2. **FEC IDENTIFICATION NUMBER** C00331827  
**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 07 01 2005 through 12 31 2005

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 Pamela J. Cann

Signature of Treasurer Electronically Filed by Pamela J. Cann Date 10 19 2009

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)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Northern Lights Political Action Committee

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	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>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		26546.61
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period .....	140305.56									
(c) Total Receipts (from Line 19) .....	85198.72	388779.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	225504.28	415326.47								
7. Total Disbursements (from Line 31) .....	154079.40	343901.59								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	71424.88	71424.88								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

Northern Lights Political Action Committee

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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) .....	21500.00	138250.00
(ii) Unitemized .....	7190.46	7390.46
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	28690.46	145640.46
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	43500.00	230000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	72190.46	375640.46
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) .....	1500.00	1500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	10872.73	10872.73
17. Other Federal Receipts (Dividends, Interest, etc.) .....	635.53	766.67
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)) .....	85198.72	388779.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	85198.72	388779.86

## 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.....	50579.40	121738.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	50579.40	121738.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	99500.00	218163.20
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 .....	4000.00	4000.00
(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)) .....	4000.00	4000.00
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))..	154079.40	343901.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	154079.40	343901.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 37

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) .....	72190.46	375640.46
34. Total Contribution Refunds (from Line 28(d)) .....	4000.00	4000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	68190.46	371640.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	50579.40	121738.39
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1500.00	1500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	50579.40	121738.39

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 37  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Herschel L. Abbott, Jr.

Mailing Address 1133 21st Street NW  
Suite 900

City Washington State DC Zip Code 20036

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

Name of Employer Bell South Occupation VP Gov't Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M / D D / Y Y Y Y Y  
07 / 05 / 2005

Transaction ID: 1135098679196

Amount of Each Receipt this Period: 1000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Earl W. Comstock

Mailing Address 6225 30th Street NW

City Washington State DC Zip Code 20015

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

Name of Employer Sher & Blackwell Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M / D D / Y Y Y Y Y  
10 / 17 / 2005

Transaction ID: 1138394756133

Amount of Each Receipt this Period: 5000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
James H. English

Mailing Address 9215 Brinkley Lane

City Manassas State VA Zip Code 20110

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

Name of Employer O'Connor and Hannah Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M / D D / Y Y Y Y Y  
09 / 20 / 2005

Transaction ID: 1135107213220

Amount of Each Receipt this Period: 2000.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

**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 / 37
	<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)  
Northern Lights Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dean Mark Goodman		Date of Receipt MM / DD / YYYY 08 / 01 / 2005
	Mailing Address 525 South Flagler Drive		Transaction ID: 1135099065035
	City West Palm Beach	State FL	Zip Code 33401
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Paxson Communications	Occupation President	Check

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---------------------------------------------------------------------------------------------------------------------------------	------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Robert Hytner		Date of Receipt MM / DD / YYYY 09 / 20 / 2005
	Mailing Address 3924 Cobbler Mountain Road		Transaction ID: 1135107281329
	City Delaplane	State VA	Zip Code 20144
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
	Name of Employer Information Manufacturing Corp.	Occupation Chairman & CEO	Check

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00
---------------------------------------------------------------------------------------------------------------------------------	-------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Theodore L. Jones, Ted		Date of Receipt MM / DD / YYYY 07 / 05 / 2005
	Mailing Address PO Box 65122		Transaction ID: 1135098588026
	City Baton Rouge	State LA	Zip Code 70896
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed	Occupation Attorney	Check

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---------------------------------------------------------------------------------------------------------------------------------	------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8 / 37  
(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)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Andrew D. Lundquist  
Mailing Address 3131 N 18th Street

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation  
The Lundquist Group Owner/President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2005

Transaction ID: 1135107112940

Amount of Each Receipt this Period  
2500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Mr James M. Micali  
Mailing Address 1 Parkway South

City State Zip Code  
Greenville SC 29615

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

Name of Employer Occupation  
Michelin North America, Inc. Chairman

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2005

Transaction ID: 1135107247907

Amount of Each Receipt this Period  
1000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
Marla Paxson  
Mailing Address 529 South Flagler Drive Aot 26-H

City State Zip Code  
West Palm Beach FL 33401-5926

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2005

Transaction ID: 1135099025223

Amount of Each Receipt this Period  
2000.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5500.00**

**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 / 37  
(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)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
J. Duncan Smith

Mailing Address 102 W Pennsylvania Avenue Suite 50

City State Zip Code  
Towson MD 21204

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

Name of Employer Occupation  
Sinclair Communications Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2005

**Transaction ID:** 1135107406577

Amount of Each Receipt this Period  
2000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Kidlar R. Sridhar

Mailing Address PO Box 97 Building 54

City State Zip Code  
Moffett Field CA 94035

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

Name of Employer Occupation  
Ion America CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2005

**Transaction ID:** 1138395062535

Amount of Each Receipt this Period  
1000.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**TOTAL** This Period (last page this line number only) ..... ► 21500.00

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

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

FOR LINE NUMBER: PAGE 10 / 37  
(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)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Air Transport Assoc. PAC

Mailing Address 1301 Pennsylvania Ave., NW  
Suite 1100

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00114694

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 08 / 2005  
**Transaction ID:** 1138670065064  
 Amount of Each Receipt this Period 5000.00  
 Check

**B.** Full Name (Last, First, Middle Initial)  
Alliant Techsystems Employee Citizenship Fund

Mailing Address 1755 Jefferson Davis Hwy.  
#1207 Crystal Sq. 5

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 12 / 2005  
**Transaction ID:** 1135092177427  
 Amount of Each Receipt this Period 2000.00  
 Check

**C.** Full Name (Last, First, Middle Initial)  
American Airlines PAC

Mailing Address 1101 17th Street NW  
No. 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 11 / 2005  
**Transaction ID:** 1135098477136  
 Amount of Each Receipt this Period 2500.00  
 Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 37  
(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)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Blue Cross Blue Shield Association PAC  
Mailing Address 1310 G Street NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	5

**Transaction ID:** 1135098432887  
 Amount of Each Receipt this Period  
 2500.00  
 Check

**B.** Full Name (Last, First, Middle Initial)  
Carpenters' Legis. Improvement Comm.  
Mailing Address 101 Constitution Ave., NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	5

**Transaction ID:** 1135091712370  
 Amount of Each Receipt this Period  
 5000.00  
 Check

**C.** Full Name (Last, First, Middle Initial)  
EMC Corporation PAC  
Mailing Address 176 South Street

City State Zip Code  
Hopkinton MA 01748

FEC ID number of contributing federal political committee. **C** C00385948

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	5

**Transaction ID:** 1135092128678  
 Amount of Each Receipt this Period  
 1500.00  
 Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9000.00**

**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 12 / 37  
(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)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
General Electric Company PAC

Mailing Address 1299 Pennsylvania Avenue NW  
Suite 1100

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 12 / 2005  
**Transaction ID:** 1135092224692  
Amount of Each Receipt this Period: 2500.00  
Check

**B.** Full Name (Last, First, Middle Initial)  
International Foodservice Distributors Assoc. PAC

Mailing Address 201 Park Washington Court

City Falls Church State VA Zip Code 22046

FEC ID number of contributing federal political committee. **C** C00383521

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 12 / 2005  
**Transaction ID:** 1135107450216  
Amount of Each Receipt this Period: 2000.00  
Check

**C.** Full Name (Last, First, Middle Initial)  
Koch Industries Inc. PAC

Mailing Address 655 15th St., NW  
Suite 445

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 21 / 2005  
**Transaction ID:** 1138401907494  
Amount of Each Receipt this Period: 1000.00  
Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00

**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 / 37  
(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)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
MCI Employees PAC

Mailing Address 1133 19th Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00142836

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 9 / 2 0 0 5

**Transaction ID:** 1138401809167

Amount of Each Receipt this Period  
5000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Motorola Civic Action Campaign Fund

Mailing Address 1350 I St., NW, Suite 400

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00075341

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 2 / 2 0 0 5

**Transaction ID:** 1135092349019

Amount of Each Receipt this Period  
2000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
Orbital Sciences Corporation PAC

Mailing Address 21700 Atlantic Boulevard

City State Zip Code  
Dulles VA 20166

FEC ID number of contributing federal political committee. **C** C00195263

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 8 / 2 0 0 5

**Transaction ID:** 1138394976895

Amount of Each Receipt this Period  
2000.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9000.00**

**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 / 37  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Northern Lights Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Raytheon Company PAC

Mailing Address 1100 Wilson Boulevard Suite 1500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 5

**Transaction ID:** 1135092269035

Amount of Each Receipt this Period  
2500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
The Home Depot PAC

Mailing Address 2455 Paces Ferry Road, NW

City State Zip Code  
Atlanta GA 30339-4024

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 5

**Transaction ID:** 1135092308597

Amount of Each Receipt this Period  
4000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
US Airways Political Actrion Committee

Mailing Address 2345 Crystal Drive

City State Zip Code  
Arlington VA 22227

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 0 / 2 0 0 5

**Transaction ID:** 1138650879682

Amount of Each Receipt this Period  
2000.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

**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 15 / 37	
	(check only one)			
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Northern Lights Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) United Defense Employees PAC		Date of Receipt	
	Mailing Address 1525 Wilson Blvd. Suite 700		M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5	
	City	State	Zip Code	<b>Transaction ID:</b> 1138401539327
	Arlington	VA	22209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C C00330076	2000.00
	Name of Employer		Occupation	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	43500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 37	
	(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 checked="" 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)  
Northern Lights Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) 116 Club		Date of Receipt
Mailing Address 234 3rd Street NE		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
City	State	Zip Code
Washington	DC	20002
FEC ID number of contributing federal political committee.		Transaction ID: 1138401706528
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1500.00"/>
Occupation		Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		refund on overpayment of account
Aggregate Year-to-Date ▼		<input type="text" value="1500.00"/>

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 / 37	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" 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)  
Northern Lights Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee		Date of Receipt
	Mailing Address 425 2nd Street SE		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Washington	DC	20002
	FEC ID number of contributing federal political committee.		Transaction ID: 1138404707708
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text" value="10872.73"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Check	
Aggregate Year-to-Date ▼		refund of excessive in-kind contribution from May.	
<input type="text" value="10872.73"/>			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="10872.73"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="10872.73"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 37

(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 checked="" 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)  
Northern Lights Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

T. Rowe Price Prime Reserve Fund

Mailing Address P.O. Box 89000

City State Zip Code  
Baltimore MD 21289

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
478.34

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 5

Transaction ID: 1135094676121

Amount of Each Receipt this Period

115.50

Interest

Dividends

**B.**

Full Name (Last, First, Middle Initial)

T. Rowe Price Prime Reserve Fund

Mailing Address P.O. Box 89000

City State Zip Code  
Baltimore MD 21289

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.92

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Transaction ID: 1135099161643

Amount of Each Receipt this Period

84.48

Interest

Dividends

**C.**

Full Name (Last, First, Middle Initial)

T. Rowe Price Prime Reserve Fund

Mailing Address P.O. Box 89000

City State Zip Code  
Baltimore MD 21289

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
362.84

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 5

Transaction ID: 1135109398418

Amount of Each Receipt this Period

121.92

Interest

dividends

**SUBTOTAL** of Receipts This Page (optional) .....

321.90

**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 19 / 37
	(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

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)  
Northern Lights Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) T. Rowe Price Prime Reserve Fund		Date of Receipt
	Mailing Address P.O. Box 89000		<input type="text" value="11"/> <input type="text" value="30"/> <input type="text" value="2005"/>
	City	State	Zip Code
	Baltimore	MD	21289
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 1138394600416
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="609.74"/>	
			Amount of Each Receipt this Period <input type="text" value="131.40"/>
			Interest

<b>B.</b>	Full Name (Last, First, Middle Initial) T. Rowe Price Prime Reserve Fund		Date of Receipt
	Mailing Address P.O. Box 89000		<input type="text" value="12"/> <input type="text" value="31"/> <input type="text" value="2005"/>
	City	State	Zip Code
	Baltimore	MD	21289
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 1138401411219
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="766.67"/>	
			Amount of Each Receipt this Period <input type="text" value="156.93"/>
			Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="288.33"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="610.23"/>

**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 20 / 37

<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

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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 1135108502401 Date of Disbursement
	Mailing Address PO Box 1270	<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2005"/>
	City Newark State NJ Zip Code 07101	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card expenses	<input type="text" value="2210.91"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼
		See itemized expenses

B.	Full Name (Last, First, Middle Initial) Cheeca Lodge	Transaction ID: 1135108631289 Date of Disbursement
	Mailing Address PO Box 527 Mile Marker 82	<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2005"/>
	City Islamorada State FL Zip Code 33036	Amount of Each Disbursement this Period
	Purpose of Disbursement entertainment for PAC fundraiser	<input type="text" value="1784.41"/>
	Candidate Name	<input type="text" value="003"/> 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>[MEMO ITEM]</b> See American Express 9/12- /2005 \$2,210.91

C.	Full Name (Last, First, Middle Initial) Pamela J. Cann	Transaction ID: 1135096140304 Date of Disbursement
	Mailing Address 12615 Beechfern Lane	<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>
	City Bowie State MD Zip Code 20715	Amount of Each Disbursement this Period
	Purpose of Disbursement flowers for PAC contributor	<input type="text" value="119.29"/>
	Candidate Name	<input type="text" value="001"/> 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2330.20"/>
<b>TOTAL</b> 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

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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Pamela J. Cann <hr/> Mailing Address 12615 Beechfern Lane <hr/> City Bowie State MD Zip Code 20715 <hr/> Purpose of Disbursement PAC cell phone charges 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: 1135098304467 Date of Disbursement 07 / 27 / 2005 <hr/> Amount of Each Disbursement this Period 213.93 <hr/> Category/Type 001
B.	Full Name (Last, First, Middle Initial) Pamela J. Cann <hr/> Mailing Address 12615 Beechfern Lane <hr/> City Bowie State MD Zip Code 20715 <hr/> Purpose of Disbursement tips for servers at PAC fundraiser 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: 1135108893050 Date of Disbursement 09 / 27 / 2005 <hr/> Amount of Each Disbursement this Period 160.00 <hr/> Category/Type 003
C.	Full Name (Last, First, Middle Initial) Pamela J. Cann <hr/> Mailing Address 12615 Beechfern Lane <hr/> City Bowie State MD Zip Code 20715 <hr/> Purpose of Disbursement PAC donor gifts 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: 1138401000068 Date of Disbursement 11 / 02 / 2005 <hr/> Amount of Each Disbursement this Period 39.67 <hr/> Category/Type 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**413.60**

**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 22 / 37

<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

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)  
Northern Lights Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Robison International  Mailing Address 1 Massachussettes Avenue NW Suite 880  City Washington State DC Zip Code 20001  Purpose of Disbursement PAC fundraising fees/courier 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>Transaction ID:</b> 1135094051011 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5	<b>Amount of Each Disbursement this Period</b> 3474.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Robison International  Mailing Address 1 Massachussettes Avenue NW Suite 880  City Washington State DC Zip Code 20001  Purpose of Disbursement PAC fundraising fee/food/beverage 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>Transaction ID:</b> 1135096052446 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 5	<b>Amount of Each Disbursement this Period</b> 3865.88
<b>C.</b>	Full Name (Last, First, Middle Initial) Robison International  Mailing Address 1 Massachussettes Avenue NW Suite 880  City Washington State DC Zip Code 20001  Purpose of Disbursement PAC fundraising fee/food/beverage 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>Transaction ID:</b> 1135096063743 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 5	<b>Amount of Each Disbursement this Period</b> 5933.75

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>13273.63</b>
<b>TOTAL</b> 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 / 37

<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

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)  
Northern Lights Political Action Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Robison International</p> <hr/> <p>Mailing Address 1 Massachussettes Avenue NW Suite 880</p> <hr/> <p>City Washington State DC Zip Code 20001</p> <hr/> <p>Purpose of Disbursement PAC administrative support</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1135098358950</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3000.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Robison International</p> <hr/> <p>Mailing Address 1 Massachussettes Avenue NW Suite 880</p> <hr/> <p>City Washington State DC Zip Code 20001</p> <hr/> <p>Purpose of Disbursement PAC administrative support</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1135108976845</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3290.08"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Robison International</p> <hr/> <p>Mailing Address 1 Massachussettes Avenue NW Suite 880</p> <hr/> <p>City Washington State DC Zip Code 20001</p> <hr/> <p>Purpose of Disbursement PAC administrative support</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1135109001876</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3825.64"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**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 24 / 37

<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

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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robison International	Transaction ID: 1138402403925 Date of Disbursement																			
	Mailing Address 1 Massachussettes Avenue NW Suite 880	<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>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	5												
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC administrative support	<table border="1"><tr><td>3605.24</td></tr></table>	3605.24																		
3605.24																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	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) Robison International	Transaction ID: 1138402586470 Date of Disbursement																			
	Mailing Address 1 Massachussettes Avenue NW Suite 880	<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>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	5												
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC administrative support	<table border="1"><tr><td>3902.90</td></tr></table>	3902.90																		
3902.90																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	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) Splendid Fare Catering	Transaction ID: 1135108317014 Date of Disbursement																			
	Mailing Address 1310 Braddock Place	<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>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	0	5												
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period																			
	Purpose of Disbursement catering for PAC fundraiser	<table border="1"><tr><td>1983.60</td></tr></table>	1983.60																		
1983.60																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/ Type	003																		
003																					
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>9491.74</td></tr></table>	9491.74
9491.74		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></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)

PAGE 25 / 37

<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

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)  
Northern Lights Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ted Stevens <hr/> Mailing Address 522 Hart Senate Office Bldg. <hr/> City Washington State DC Zip Code 20515 <hr/> Purpose of Disbursement beverages for PAC fundraiser 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) ▼	<b>Transaction ID:</b> 1135098251811 Date of Disbursement 07 / 27 / 2005	Amount of Each Disbursement this Period 260.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Townhouse Associates <hr/> Mailing Address 1155 21st Street NW Suite 300 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement room rental and beverages for PAC fundra 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) ▼	<b>Transaction ID:</b> 1135108836207 Date of Disbursement 09 / 27 / 2005	Amount of Each Disbursement this Period 190.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Williams & Jensen, PLLC <hr/> Mailing Address 1155 21st Street NW Suite 300 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement legal fees for PAC 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) ▼	<b>Transaction ID:</b> 1135095920197 Date of Disbursement 07 / 14 / 2005	Amount of Each Disbursement this Period 2090.92

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2540.92

**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 26 / 37

<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

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)  
Northern Lights Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Williams & Jensen, PLLC

**Transaction ID:** 1135108769021  
**Date of Disbursement**

Mailing Address 1155 21st Street NW  
Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	5

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

1648.45
---------

Purpose of Disbursement  
PAC legal expenses

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

**B.**

Full Name (Last, First, Middle Initial)  
Williams & Jensen, PLLC

**Transaction ID:** 1138402932981  
**Date of Disbursement**

Mailing Address 1155 21st Street NW  
Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	0	5

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

3210.68
---------

Purpose of Disbursement  
legal fees/phone/fax/courier/copies

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4859.13
---------

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

43024.94
----------

**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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Alaska Republican Party	Transaction ID: 1138402022883 Date of Disbursement
	Mailing Address 1001 West Firewood Lane	<input type="text" value="12"/> <input type="text" value="09"/> / <input type="text" value="2005"/>
	City Anchorage State AK Zip Code 99503	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="011"/> 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) Bluegrass Committee	Transaction ID: 1138399180310 Date of Disbursement
	Mailing Address PO Box 3932	<input type="text" value="11"/> <input type="text" value="02"/> / <input type="text" value="2005"/>
	City Louisville State KY Zip Code 40201	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="2500.00"/>
	Candidate Name	<input type="text" value="011"/> 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) Changing Tide Committee	Transaction ID: 1135096233397 Date of Disbursement
	Mailing Address PO Box 1174	<input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="2005"/>
	City Loveland State CO Zip Code 80539	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="2000.00"/>
	Candidate Name	<input type="text" value="011"/> 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9500.00"/>
<b>TOTAL</b> 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 28 / 37

<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)  
Northern Lights Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Craig for U.S. Senate <hr/> Mailing Address 802 W Bannock Suite LP101 <hr/> City Boise State ID Zip Code 83701 <hr/> Purpose of Disbursement PAC contribution Candidate Name Larry E. Craig Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District: 00	<b>Transaction ID:</b> 1138662538212 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5
	Amount of Each Disbursement this Period 5000.00 Category/Type: 011
<b>B.</b> Full Name (Last, First, Middle Initial) Defend America PAC <hr/> Mailing Address PO Box 2626 <hr/> City Tuscaloosa State AL Zip Code 35403 <hr/> Purpose of Disbursement contribution 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>Transaction ID:</b> 1135107674250 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 5
	Amount of Each Disbursement this Period 2500.00 Category/Type: 011
<b>C.</b> Full Name (Last, First, Middle Initial) Defend America PAC <hr/> Mailing Address PO Box 2626 <hr/> City Tuscaloosa State AL Zip Code 35403 <hr/> Purpose of Disbursement contribution 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>Transaction ID:</b> 1138399416198 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 5
	Amount of Each Disbursement this Period 2500.00 Category/Type: 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

10000.00

**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 29 / 37

<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)  
Northern Lights Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Denali PAC <hr/> Mailing Address 1050 Thomas Jefferson Street NW 7th Floor <hr/> City Washington State DC Zip Code 20007 <hr/> Purpose of Disbursement contribution 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: 1135107619304 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2005
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ensign for Senate <hr/> Mailing Address PO Box 26568 <hr/> City Las Vegas State NV Zip Code 89126 <hr/> Purpose of Disbursement contribution Candidate Name John Ensign <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1135093717048 Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2005
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Friends for Mike McGavick <hr/> Mailing Address 1075 Bellevue Wau NE #504 <hr/> City Bellevue State WA Zip Code 98004 <hr/> Purpose of Disbursement contribution Candidate Name Michael Sean McGavick <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1135109281326 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2005
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

15000.00

**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 / 37

<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)  
Northern Lights Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Conrad Burns 2006 <hr/> Mailing Address P.O. Box 1596 <hr/> City Helena State MT Zip Code 59624 <hr/> Purpose of Disbursement contribution Candidate Name Conrad Burns <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1135107772224 Date of Disbursement 09 / 12 / 2005
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Craig Thomas <hr/> Mailing Address P.O. Box 1580 <hr/> City Casper State WY Zip Code 82601 <hr/> Purpose of Disbursement contribution Candidate Name Craig Thomas <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1138400278171 Date of Disbursement 11 / 02 / 2005
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Dick Lugar <hr/> Mailing Address 47 S Meridian Street Suite 200 <hr/> City Indianapolis State IN Zip Code 46204 <hr/> Purpose of Disbursement contribution Candidate Name Richard G. Lugar <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1138402169069 Date of Disbursement 12 / 09 / 2005
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

15000.00

**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

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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt	Transaction ID: 1138400488669 Date of Disbursement
	Mailing Address 1736 E. Sunshine St. Suite 1011	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
	City Springfield State MO Zip Code 65804	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="1000.00"/>
	Candidate Name Roy Blunt	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of the Big Sky Political Action Committee	Transaction ID: 1138399602461 Date of Disbursement
	Mailing Address 1155 21st Street NW Suite 300	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="011"/> 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) Hatch Election Committee	Transaction ID: 1138400894601 Date of Disbursement
	Mailing Address 310 South Main Street Suite 1420	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
	City Salt Lake City State UT Zip Code 84101	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="5000.00"/>
	Candidate Name Orrin G. Hatch	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Idaho Republican Party	Transaction ID: 1135108204423 Date of Disbursement
	Mailing Address PO Box 2267	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2005"/>
	City Boise State ID Zip Code 83701	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="011"/> 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) Kay Bailey Hutchison For Senate Committee	Transaction ID: 1135094115759 Date of Disbursement
	Mailing Address P.O. Box 9190	<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2005"/>
	City Dallas State TX Zip Code 75209	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name Kay Bailey Hutchison	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mark Kennedy '06	Transaction ID: 1135109339200 Date of Disbursement
	Mailing Address PO Box 49333	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2005"/>
	City Blaine State MN Zip Code 55449	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="5000.00"/>
	Candidate Name Mark Raymond Kennedy	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> 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 33 / 37

<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)  
Northern Lights Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mark Kennedy '06</p> <p>Mailing Address PO Box 49333</p> <p>City Blaine State MN Zip Code 55449</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Mark Raymond Kennedy</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 1138402667094</p> <p>Date of Disbursement 12 / 21 / 2005</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Comm.</p> <p>Mailing Address 320 First St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement stopped check</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><b>Transaction ID:</b> 1138398059106</p> <p>Date of Disbursement 11 / 10 / 2005</p> <p>Amount of Each Disbursement this Period -15000.00</p> <p>011 Category/ Type</p> <p>stopped payment on check 1841 to NRCC on 6/3/05</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Comm.</p> <p>Mailing Address 320 First St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement contribution</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><b>Transaction ID:</b> 1138400354373</p> <p>Date of Disbursement 11 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5000.00

**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 34 / 37

<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)  
Northern Lights Political Action Committee

A.	Full Name (Last, First, Middle Initial) Preserving America's Traditions PAC (PATPAC)	Transaction ID: 1138399315918 Date of Disbursement
	Mailing Address 228 South Washington Street Suite B-20	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution Candidate Name	<input type="text" value="4000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Santorum 2006	Transaction ID: 1138402256177 Date of Disbursement
	Mailing Address 1 Tower Bridge Suite 1440	<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2005"/>
	City West Conshohocken State NY Zip Code 19428	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution Candidate Name Richard J. Santorum	<input type="text" value="2500.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Talent for Senate Committee	Transaction ID: 1135107824502 Date of Disbursement
	Mailing Address 147 N Meramec Suite 100	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2005"/>
	City St. Louis State MO Zip Code 63105	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution Candidate Name James M. Talent	<input type="text" value="2500.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9000.00"/>
<b>TOTAL</b> 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 35 / 37

<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)  
Northern Lights Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Talent for Senate Committee</p> <p>Mailing Address 147 N Meramec Suite 100</p> <p>City St. Louis State MO Zip Code 63105</p> <p>Purpose of Disbursement contribution <input type="checkbox"/> 011 Candidate Name James M. Talent Category/Type</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: 2006 <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: MO District:</p>	<p><b>Transaction ID:</b> 1135107901951 <b>Date of Disbursement</b> 09 / 16 / 2005</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Senate Victory Fund PAC</p> <p>Mailing Address PO Box 7274</p> <p>City Tupelo State MS Zip Code 38802</p> <p>Purpose of Disbursement contribution <input type="checkbox"/> 011 Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1135095815293 <b>Date of Disbursement</b> 07 / 14 / 2005</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Senate Victory Fund PAC</p> <p>Mailing Address PO Box 7274</p> <p>City Tupelo State MS Zip Code 38802</p> <p>Purpose of Disbursement contribution <input type="checkbox"/> 011 Candidate Name Category/Type</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 1138398329634 <b>Date of Disbursement</b> 11 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 2500.00</p>

**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)

PAGE 36 / 37

<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)  
Northern Lights Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Victory PAC

Mailing Address 310 First St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 1135094597028

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

99500.00

**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)

PAGE 37 / 37

<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 checked="" 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)  
Northern Lights Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr Robert Hytner

Transaction ID: 1138401137629

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	1		0	4		2	0	0	5

Mailing Address 3924 Cobbler Mountain Road

City State Zip Code  
Delaplane VA 20144

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
contribution refund

010
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

4000.00
---------

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

4000.00
---------