

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 Credit Union Legislative Action Council of CUNA

ADDRESS (number and street) 601 Pennsylvania Avenue, NW South Building, Suite 600 Washington DC 20004 2601

2. FEC IDENTIFICATION NUMBER C00007880 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2006 through 04 30 2006

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 Patricia Sowick

Signature of Treasurer Electronically Filed by Patricia Sowick Date 05 19 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Credit Union Legislative Action Council of CUNA

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		561123.66
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	510169.37									
(c) Total Receipts (from Line 19) .....	107000.12	560639.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	617169.49	1121763.60								
7. Total Disbursements (from Line 31) .....	102379.02	606973.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	514790.47	514790.47								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Credit Union Legislative Action Council of CUNA

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	8904.46	54672.41
(i) Itemized (use Schedule A) .....	76144.74	431323.60
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	85049.20	485996.01
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	85049.20	485996.01
12. Transfers From Affiliated/Other Party Committees .....	21000.00	68820.00
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) .....	55.01	2284.01
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	895.91	3539.92
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)) .....	107000.12	560639.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	107000.12	560639.94

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	8349.02	101243.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8349.02	101243.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	94020.00	505720.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	10.00	10.00
(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)) .....	10.00	10.00
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))..	102379.02	606973.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	102379.02	606973.13

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	85049.20	485996.01
34. Total Contribution Refunds (from Line 28(d)) .....	10.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	85039.20	485986.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8349.02	101243.13
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	55.01	2284.01
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8294.01	98959.12

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 45		
	<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

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)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Charles Amato

Mailing Address 9311 San Pedro Suite 600

City San Antonio State TX Zip Code 78216

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

Name of Employer SWBC Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2006

**Transaction ID:** 1146682235789

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
John J Bratsakis

Mailing Address 416 W Courtland St

City Mundelein State IL Zip Code 60060

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

Name of Employer Community Trust CU Occupation Credit Union CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2006

**Transaction ID:** 1146507536611

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Kevin P. Brueseke

Mailing Address 1314 Greenmar Drive

City Fenton State MO Zip Code 63026

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

Name of Employer Missouri Credit Union System Occupation SVP, Finance & Technology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 536.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2006

**Transaction ID:** 1147203762716

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Mr Kevin P. Brueseke

Mailing Address 1314 Greenmar Drive

City State Zip Code  
Fenton MO 63026

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

Name of Employer Missouri Credit Union System Occupation SVP, Finance & Technology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 548.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 6

Transaction ID: 1147204350871

Amount of Each Receipt this Period  
12.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark R. Condon

Mailing Address PO Box 431

City State Zip Code  
Madison WI 53701

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

Name of Employer CUNA Inc. Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 6

Transaction ID: 1146841309217

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark R. Condon

Mailing Address PO Box 431

City State Zip Code  
Madison WI 53701

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

Name of Employer CUNA Inc. Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 6

Transaction ID: 1146839707065

Amount of Each Receipt this Period  
55.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	122.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Cindy A. Connelly

Mailing Address 2937 Asteria Pointe

City State Zip Code  
Duluth GA 30097

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

Name of Employer Georgia Credit Union Affiliates  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
590.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 5 / 2 0 0 6

Transaction ID: 114659511899

Amount of Each Receipt this Period  
15.00

**B.** Full Name (Last, First, Middle Initial)  
Cindy A. Connelly

Mailing Address 2937 Asteria Pointe

City State Zip Code  
Duluth GA 30097

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

Name of Employer Georgia Credit Union Affiliates  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
605.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 5 / 2 0 0 6

Transaction ID: 1146595112009

Amount of Each Receipt this Period  
15.00

**C.** Full Name (Last, First, Middle Initial)  
Ms Gretchen Graf Drobynk

Mailing Address 2454 39th Pl. NW

City State Zip Code  
Washington DC 20007

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

Name of Employer CUNA Inc.  
Occupation Director of Grassroots & Political Inv

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 6

Transaction ID: 1146841309877

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Ms Gretchen Graf Drobyk

Mailing Address 2454 39th Pl. NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
CUNA Inc. Director of Grassroots & Political Inv

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 6

Transaction ID: 1146839707725

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joanne M. Duncan

Mailing Address 601 Pennsylvania Ave NW South Bldg

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
CUNA Inc. SVP & Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 6

Transaction ID: 1146841309987

Amount of Each Receipt this Period  
42.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joanne M. Duncan

Mailing Address 601 Pennsylvania Ave NW South Bldg

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
CUNA Inc. SVP & Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 6

Transaction ID: 1146839707835

Amount of Each Receipt this Period  
42.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	134.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A.</b> Ms Mary Mitchell Dunn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 42123 Cherry Spg Lane		<b>Transaction ID:</b> 1146841310097	
City State Zip Code Leesburg VA 22075		Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation CUNA Inc. SVP & Assoc Genl Counsel For Regulator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 357.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms Mary Mitchell Dunn		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6	
Mailing Address 42123 Cherry Spg Lane		<b>Transaction ID:</b> 1146839707945	
City State Zip Code Leesburg VA 22075		Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation CUNA Inc. SVP & Assoc Genl Counsel For Regulator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr Peter T Dyer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address 44702 Nanamoana Place		<b>Transaction ID:</b> 1146685340956	
City State Zip Code Kaneohe HI 96744-2554		Amount of Each Receipt this Period 382.37	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation University of Hawaii FCU CU Volunteer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.37	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	592.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Mr Scott G. Earl

Mailing Address 1805 S Redwood Road  
Suite 200

City State Zip Code  
Salt Lake City UT 84115

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

Name of Employer Occupation  
CUNA Inc. Director Disaster Recovery & Preparedness

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 6

**Transaction ID:** 1146839708165

Amount of Each Receipt this Period  
42.00

**B.** Full Name (Last, First, Middle Initial)  
Donald Edwards

Mailing Address 9224 W Franklin

City State Zip Code  
Frankfort IL 60423

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

Name of Employer Occupation  
Illinois Credit Union System SVP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.86

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 6

**Transaction ID:** 1146061411493

Amount of Each Receipt this Period  
34.62

**C.** Full Name (Last, First, Middle Initial)  
Mr Dennis L Florreich

Mailing Address P O Box 3576

City State Zip Code  
Meridian MS 39303

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

Name of Employer Occupation  
Meridian Mutual FCU CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 6

**Transaction ID:** 1146162310346

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>326.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. John R. Franklin		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address PO Box 431		<b>Transaction ID:</b> 1146841310537
City State Zip Code Madison WI 53701	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer CUNA Inc.	Occupation EVP & Chief Operating Officer Madison	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John R. Franklin		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address PO Box 431		<b>Transaction ID:</b> 1146839708385
City State Zip Code Madison WI 53701	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer CUNA Inc.	Occupation EVP & Chief Operating Officer Madison	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Buddy Gill		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address 4455 LBJ Frwy		<b>Transaction ID:</b> 1146681499368
City State Zip Code Farmers Branch TX 75244	Amount of Each Receipt this Period 57.70	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Texas Credit Union League	Occupation VP of Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 711.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	141.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) A. Richard A. Gose		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 10500 Hunter Station Road		Transaction ID: 1146841310757
City State Zip Code Vienna VA 22181		Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		
Name of Employer CUNA Inc.	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name (Last, First, Middle Initial) B. Richard A. Gose		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address 10500 Hunter Station Road		Transaction ID: 1146839708625
City State Zip Code Vienna VA 22181		Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		
Name of Employer CUNA Inc.	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Christopher Gunnare		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 1500 NW 118th St.		Transaction ID: 1146497926043
City State Zip Code Des Moines IA 50325		Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C		
Name of Employer Iowa Corporate Central CU	Occupation VP Acct Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	327.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A.</b> Eric Hardman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 3252 Regency woods Place		<b>Transaction ID:</b> 114667796604
City State Zip Code IMPERIAL MO 63052	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Electro Savings CU	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Eric Hardman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 3252 Regency woods Place		<b>Transaction ID:</b> 1147204420983
City State Zip Code IMPERIAL MO 63052	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Electro Savings CU	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Roshara Holub		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 16573 Centerpointe Drive		<b>Transaction ID:</b> 1146845458955
City State Zip Code Wildwood MO 63040	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Missouri Credit Union Ass-ociation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1255.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A.</b> Kimberly Houle		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 304 Turnpike Road		Transaction ID: 1146856553291
City State Zip Code Southborough MA 01772	Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Hanscom FCU	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Marla Marsh		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address 2325 Harborlight		Transaction ID: 1146685915648
City State Zip Code Wichita KS 67204	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Kansas Credit Union Assoc- iation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Marla Marsh		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address 2325 Harborlight		Transaction ID: 1146685978320
City State Zip Code Wichita KS 67204	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Kansas Credit Union Assoc- iation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	265.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Peter J Matthews</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 57 Marlboro Street		<b>Transaction ID: 1146854860759</b>	
City State Zip Code Newburyport MA 01950		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Merrimack Valley FCU President/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>B. Richard W. McBride</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 4596 Burnt Oak Dr		<b>Transaction ID: 1146841312737</b>	
City State Zip Code Fairfax VA 22039		Amount of Each Receipt this Period 208.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation CUNA Inc. EVP Chief of Staff & COO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1456.00	

Full Name (Last, First, Middle Initial) <b>C. Richard W. McBride</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 6	
Mailing Address 4596 Burnt Oak Dr		<b>Transaction ID: 1146839710605</b>	
City State Zip Code Fairfax VA 22039		Amount of Each Receipt this Period 208.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation CUNA Inc. EVP Chief of Staff & COO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1664.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	431.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Michael J. Mercer

Mailing Address 6705 Sugarloaf Pkwy Suite 200

City State Zip Code  
Duluth GA 30097

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

Name of Employer Georgia Credit Union Affiliates Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 6

Transaction ID: 1146595114449

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Michael J. Mercer

Mailing Address 6705 Sugarloaf Pkwy Suite 200

City State Zip Code  
Duluth GA 30097

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

Name of Employer Georgia Credit Union Affiliates Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 6

Transaction ID: 1146595114559

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel A. Mica

Mailing Address 7307 Burtonwood Drive

City State Zip Code  
Alexandria VA 22307

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

Name of Employer CUNA Inc. Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1354.25

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 6

Transaction ID: 1146841313067

Amount of Each Receipt this Period  
208.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	258.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Daniel A. Mica</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6	
Mailing Address 7307 Burtonwood Drive		<b>Transaction ID: 1146839710935</b>	
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period 208.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CUNA Inc.	Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1562.25		

Full Name (Last, First, Middle Initial) <b>B. Stan Moeckli</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 11500 Northbrook Way		<b>Transaction ID: 1146678073319</b>	
City State Zip Code St Louis MO 63117	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Electro Savings CU	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Stan Moeckli</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 11500 Northbrook Way		<b>Transaction ID: 1147204833701</b>	
City State Zip Code St Louis MO 63117	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Electro Savings CU	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	413.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Greg Moore</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 6	
Mailing Address 8951 Firestone Circle		<b>Transaction ID: 1146595114789</b>	
City State Zip Code Duluth GA 30097	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Georgia Central CU	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>B. Michael Moyes</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 6	
Mailing Address PO Box 65129		<b>Transaction ID: 1146078700254</b>	
City State Zip Code Salt Lake City UT 84165-0129	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Salt Lake City CU	Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Susan E. Newton</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 601 Pennsylvania Ave NW South Bldg		<b>Transaction ID: 1146841313507</b>	
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 104.50		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CUNA Inc.	Occupation SVP League Relations/Development & AAC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 731.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	654.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Susan E. Newton		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address 601 Pennsylvania Ave NW South Bldg		<b>Transaction ID:</b> 1146839711375
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 104.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer CUNA Inc.	Occupation SVP League Relations/Development & AAC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 836.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms Myrna Nip		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 631 Kukuiula Ln		<b>Transaction ID:</b> 1146685341516
City State Zip Code Honolulu HI 96825	Amount of Each Receipt this Period 205.48	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer University of Hawaii FCU	Occupation CU Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.48	

Full Name (Last, First, Middle Initial) <b>C.</b> Stephen Olson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6
Mailing Address 2S014 Tanglewood Drive		<b>Transaction ID:</b> 1146075823872
City State Zip Code Batavia IL 60510	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Illinois Credit Union System	Occupation EX. V.P.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	609.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Carl Sorgatz</b>		Date of Receipt MM / DD / YYYY 04 / 11 / 2006
Mailing Address 27 W 338 Churchill Rd		<b>Transaction ID:</b> 1146075824092
City <b>Winfield</b>	State <b>IL</b>	Zip Code <b>60190</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Hawthorne CU	Occupation Credit Union CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Patricia M. Sowick</b>		Date of Receipt MM / DD / YYYY 04 / 14 / 2006
Mailing Address 601 Pennsylvania Ave NW South Bldg		<b>Transaction ID:</b> 1146841314607
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20004</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer CUNA Inc.	Occupation VP Washington Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Patricia M. Sowick</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2006
Mailing Address 601 Pennsylvania Ave NW South Bldg		<b>Transaction ID:</b> 1146839712485
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20004</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer CUNA Inc.	Occupation VP Washington Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. David Sprague</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 10 Azjac Way		<b>Transaction ID: 1146855436627</b>	
City State Zip Code Sharon MA 02067		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Hanscom FCU Credit Union CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Dorothy L. Steffens</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address PO Box 431		<b>Transaction ID: 1146841314827</b>	
City State Zip Code Madison WI 53701		Amount of Each Receipt this Period 62.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CUNA Inc. Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 437.50	

Full Name (Last, First, Middle Initial) <b>C. Ms. Dorothy L. Steffens</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6	
Mailing Address PO Box 431		<b>Transaction ID: 1146839712705</b>	
City State Zip Code Madison WI 53701		Amount of Each Receipt this Period 62.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CUNA Inc. Vice President			
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) ..... ▶	425.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
Kenji Sumida

Mailing Address 1296 Aloha Oe Drive

City State Zip Code  
Kailua HI 96734

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

Name of Employer Occupation  
University Of Hawaii FCU BOD Chair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 429.29

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: 1146685341846

Amount of Each Receipt this Period  
409.29

**B.** Full Name (Last, First, Middle Initial)  
Ms. Kathleen O. Thompson

Mailing Address 601 Pennsylvania Ave NW South Bldg

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
CUNA Inc. SVP & Assoc Genl Counsel For Regulator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 6

Transaction ID: 1146841314937

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kathleen O. Thompson

Mailing Address 601 Pennsylvania Ave NW South Bldg

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
CUNA Inc. SVP & Assoc Genl Counsel For Regulator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 6

Transaction ID: 1146839712815

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	469.29
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Scot Tsuchiyama</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 6	
Mailing Address PO Box 609		<b>Transaction ID: 1146498042975</b>	
City Kekaha	State HI	Amount of Each Receipt this Period 200.00	
Zip Code 96752-0609		Transaction ID: 1146498042975	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Kekaha FCU	Occupation Credit Union CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Cynthia Urness</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 6	
Mailing Address 1500 NW 118th St.		<b>Transaction ID: 1146497933103</b>	
City Des Moines	State IA	Amount of Each Receipt this Period 50.00	
Zip Code 50325		Transaction ID: 1146497933103	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Iowa Credit Union League	Occupation VP Product Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Robert S. Walls</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 6	
Mailing Address 502 Masters Ln.		<b>Transaction ID: 1146602665664</b>	
City Magnolia	State DE	Amount of Each Receipt this Period 250.00	
Zip Code 19962-1134		Transaction ID: 1146602665664	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer New Jersey Credit Union League	Occupation CEO		
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) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	8904.46

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 45
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

**A.** Full Name (Last, First, Middle Initial)  
CALIFORNIA CREDIT UNION LEAGUE PAC - FEDERAL

Mailing Address 2350 South Garey Avenue

City Pomona State CA Zip Code 91766

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	0	6

**Transaction ID:** 1146601895129

Amount of Each Receipt this Period  
20000.00

**B.** Full Name (Last, First, Middle Initial)  
MICHIGAN CREDIT UNION LEAGUE LEGISLATIVE ACTION FUND

Mailing Address 15800 N HAGGERTY  
PO BOX 8054

City Plymouth State MI Zip Code 48235

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4320.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	0	6

**Transaction ID:** 1146601956768

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	21000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	21000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 45
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A.</b> Empire Corporate FCU		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 1021 Watervliet-Shaker Rd		<b>Transaction ID:</b> 1147287684573
City Albany State NY Zip Code 12205-2106	Amount of Each Receipt this Period 665.81	
FEC ID number of contributing federal political committee. <b>C</b>	Dividend	
Name of Employer Empire Corporate FCU Occupation	Aggregate Year-to-Date ▼ 2669.58	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> VACORP FCU		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 107 Leroy Bowen Dr		<b>Transaction ID:</b> 1147802961940
City Lynchburg State VA Zip Code 24502-5093	Amount of Each Receipt this Period 230.10	
FEC ID number of contributing federal political committee. <b>C</b>	Dividend	
Name of Employer Virginia League Corp FCU Occupation	Aggregate Year-to-Date ▼ 870.34	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	895.91
<b>TOTAL</b> This Period (last page this line number only) .....	895.91

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 27 / 45

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Empire Corporate</b>		<b>Transaction ID:</b> 1147287822594 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 04 / 2006
Mailing Address PO Box 15021		Amount of Each Disbursement this Period 86.36
City Albany State NY Zip Code 12212	Merchant Service Fee	
Purpose of Disbursement		Category/Type
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Empire Corporate</b>		<b>Transaction ID:</b> 1147288258968 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 21 / 2006
Mailing Address PO Box 15021		Amount of Each Disbursement this Period 55.01
City Albany State NY Zip Code 12212	Statement Fee	
Purpose of Disbursement		Category/Type
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MPI Coin</b>		<b>Transaction ID:</b> 1146165298922 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 27 / 2006
Mailing Address W61 N529 Washington Avenue		Amount of Each Disbursement this Period 8207.65
City Cedarburg State WI Zip Code 53012	Coins for PAC Fundraising Program	
Purpose of Disbursement Coins for PAC Fundraising Program		Category/Type 011
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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8349.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>8349.02</b>

**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 / 45

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Price for Congress</b>		Transaction ID: 1146165744537 Date of Disbursement																					
Mailing Address P.O Box 425		<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>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	7		2	0	0	6														
City Roswell	State GA	Zip Code 30077	Amount of Each Disbursement this Period																				
Purpose of Disbursement THOMAS PRICE GA-006		011	2500.00																				
Candidate Name Rep. THOMAS E. PRICE		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: GA	District: 06																						

Full Name (Last, First, Middle Initial) <b>B. Friends for Cliff Stearns</b>		Transaction ID: 1146167056474 Date of Disbursement																					
Mailing Address PO Box 308		<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>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	7		2	0	0	6														
City Silver Springs	State FL	Zip Code 34488	Amount of Each Disbursement this Period																				
Purpose of Disbursement CLIFF STEARNS FL-006		011	1000.00																				
Candidate Name Rep. CLIFF B. STEARNS		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: FL	District: 06																						

Full Name (Last, First, Middle Initial) <b>C. Future Leaders PAC</b>		Transaction ID: 1144347752939 Date of Disbursement																					
Mailing Address 1155 21 Street, NW Suite 300		<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>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	6		2	0	0	6														
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period																				
Purpose of Disbursement Leadership PAC		011	2000.00																				
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Leadership PAC																						
State:	District:																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5500.00
<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 29 / 45

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Herseth for Congress</b>		Transaction ID: 1145297701027 Date of Disbursement 04 / 17 / 2006	
Mailing Address P.O. Box 2009		Amount of Each Disbursement this Period 1000.00	
City Sioux Falls	State SD	Zip Code 57101	011 Category/ Type
Purpose of Disbursement STEPHANIE HERSETH SD-001			
Candidate Name Rep. STEPHANIE HERSETH			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: SD District: 01			

Full Name (Last, First, Middle Initial) <b>B. The Freedom Project</b>		Transaction ID: 1145301662047 Date of Disbursement 04 / 17 / 2006	
Mailing Address 111 C Street, NE		Amount of Each Disbursement this Period 5000.00	
City Washington	State DC	Zip Code 20003	011 Category/ Type
Purpose of Disbursement Leadership PAC			
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 checked="" type="checkbox"/> Other (specify) ▼ Leadership PAC		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Friends of Joe Baca</b>		Transaction ID: 1146166888372 Date of Disbursement 04 / 27 / 2006	
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1500.00	
City Sacramento	State CA	Zip Code 95814	011 Category/ Type
Purpose of Disbursement JOE BACA CA-043			
Candidate Name Rep. JOE BACA			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 43			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7500.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Friends of Joe Baca</b>		<b>Transaction ID:</b> 1145296593528 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 500.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement JOE BACA CA-043 Candidate Name Rep. JOE BACA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 43		Category/Type 011

Full Name (Last, First, Middle Initial) <b>B. Sanford Bishop for Congress</b>		<b>Transaction ID:</b> 1144346640936 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address PO Box 909		Amount of Each Disbursement this Period 1000.00
City Columbus State GA Zip Code 31902	Purpose of Disbursement SANFORD BISHOP GA-002 Candidate Name Rep. SANFORD D. BISHOP, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 02		Category/Type 011

Full Name (Last, First, Middle Initial) <b>C. Friends of Dave Weldon</b>		<b>Transaction ID:</b> 1144766826504 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6
Mailing Address PO Box 968		Amount of Each Disbursement this Period 500.00
City Melbourne State FL Zip Code 32902	Purpose of Disbursement DAVE WELDON FL-015 Candidate Name Rep. DAVE WELDON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 15		Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Julia Carson for Congress Committee</b>		<b>Transaction ID:</b> 1145298416044 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 1500.00
City Indianapolis State IN Zip Code 46244		
Purpose of Disbursement JULIA CARSON IN-007 Candidate Name Rep. JULIA M. CARSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 07	011 Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Richard E Neal for Congress Committee</b>		<b>Transaction ID:</b> 1145994896054 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 76 Magnolia Terrace		Amount of Each Disbursement this Period 1500.00
City Springfield State MA Zip Code 01108		
Purpose of Disbursement RICHARD NEAL MA-002 Candidate Name Rep. RICHARD E. NEAL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District: 02	011 Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Forbes for Congress</b>		<b>Transaction ID:</b> 1146166195593 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 15100		Amount of Each Disbursement this Period 1200.00
City Chesapeake State VA Zip Code 23328		
Purpose of Disbursement RANDY FORBES VA-004 Candidate Name Rep. RANDY FORBES Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 04	011 Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4200.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Kay Bailey Hutchison for Senate</b>		<b>Transaction ID:</b> 1144348282422 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 800 Brazos Suite 1200		Amount of Each Disbursement this Period 2500.00
City Dallas State TX Zip Code 75209		
Purpose of Disbursement KAY HUTCHISON TX-000 Candidate Name Sen. KAY Bailey HUTCHISON Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 00	011 Category/Type	

Full Name (Last, First, Middle Initial) <b>B. People for English</b>		<b>Transaction ID:</b> 1146165951296 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO Box 1940		Amount of Each Disbursement this Period 1000.00
City Erie State PA Zip Code 16507		
Purpose of Disbursement PHIL ENGLISH PA-003 Candidate Name Rep. PHIL ENGLISH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 03	011 Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Anna Eshoo for Congress</b>		<b>Transaction ID:</b> 1146166836319 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814		
Purpose of Disbursement ANNA ESHOO CA-014 Candidate Name Rep. ANNA ESHOO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 14	011 Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Friends of Congressman Tim Holden</b>		<b>Transaction ID:</b> 1146166963376 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 37		Amount of Each Disbursement this Period 1000.00
City Saint Clair State PA Zip Code 17970	Purpose of Disbursement TIM HOLDEN PA-017 Candidate Name Rep. TIM HOLDEN Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Blumenauer for Congress</b>		<b>Transaction ID:</b> 1144347990643 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 921 SW Washington Suite 810		Amount of Each Disbursement this Period 2000.00
City Portland State OR Zip Code 97205	Purpose of Disbursement EARL BLUMENAUER OR-003 Candidate Name Rep. EARL BLUMENAUER Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pryce for Congress</b>		<b>Transaction ID:</b> 1145299834699 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 145 E. Rich Street		Amount of Each Disbursement this Period 5000.00
City Columbus State OH Zip Code 43215	Purpose of Disbursement DEBORAH PRYCE OH-015 Candidate Name Rep. DEBORAH PRYCE Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	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) ..... ▶	8000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Kaptur for Congress</b>		<b>Transaction ID:</b> 1146166703453 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address P O Box 899		Amount of Each Disbursement this Period 1000.00
City Toledo State OH Zip Code 43697	011 Category/ Type	
Purpose of Disbursement MARCY KAPTUR OH-009		
Candidate Name Rep. MARCY KAPTUR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of John Boehner</b>		<b>Transaction ID:</b> 1145301579544 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 7908-I Cincinnati Dayton Road		Amount of Each Disbursement this Period 2500.00
City West Chester State OH Zip Code 45069	011 Category/ Type	
Purpose of Disbursement JOHN BOEHNER OH-008		
Candidate Name Rep. JOHN BOEHNER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Gillmor</b>		<b>Transaction ID:</b> 1145995332794 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address PO Box 150		Amount of Each Disbursement this Period 1000.00
City Old Fort State OH Zip Code 44861	011 Category/ Type	
Purpose of Disbursement PAUL GILLMOR OH-005		
Candidate Name Rep. PAUL GILLMOR		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

4500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Louise Slaughter Re-Election Committee</b>		<b>Transaction ID:</b> 1144347238248 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 366		Amount of Each Disbursement this Period 1000.00
City State Zip Code Fairport NY 14450	011 Category/ Type	
Purpose of Disbursement LOUISE SLAUGHTER NY-028		
Candidate Name Rep. LOUISE M. SLAUGHTER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 28	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Walsh for Congress Committee</b>		<b>Transaction ID:</b> 1146165799367 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 306 Winkworth Parkway		Amount of Each Disbursement this Period 1000.00
City State Zip Code Syracuse NY 13215	011 Category/ Type	
Purpose of Disbursement JAMES WALSH NY-025		
Candidate Name Representative JAMES T. WALSH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Walsh for Congress Committee</b>		<b>Transaction ID:</b> 1145298086143 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 306 Winkworth Parkway		Amount of Each Disbursement this Period 1000.00
City State Zip Code Syracuse NY 13215	011 Category/ Type	
Purpose of Disbursement JAMES WALSH NY-025		
Candidate Name Rep. JAMES T. WALSH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	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) ..... ▶	3000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Stephanie Tubbs Jones for Congress</b>		<b>Transaction ID:</b> 1145995228121 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6	
Mailing Address 3729 Silsby Road		Amount of Each Disbursement this Period 2500.00	
City University Heights	State OH Zip Code 44118		
Purpose of Disbursement STEPHANIE JONES OH-011			011 Category/ Type
Candidate Name Rep. STEPHANIE Tubbs JONES			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 11			

Full Name (Last, First, Middle Initial) <b>B. Wally Herger for Congress Committee</b>		<b>Transaction ID:</b> 1144346721527 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 1000.00	
City Chico	State CA Zip Code 95927		
Purpose of Disbursement WALLY HERGER CA-002			011 Category/ Type
Candidate Name Rep. WALLY HERGER			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 02			

Full Name (Last, First, Middle Initial) <b>C. SIMPSON FOR CONGRESS</b>		<b>Transaction ID:</b> 1146168193474 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6	
Mailing Address 1487 Parkway Dr.		Amount of Each Disbursement this Period 1000.00	
City BLACKFOOT	State ID Zip Code 83221		
Purpose of Disbursement MIKE SIMPSON ID-002			011 Category/ Type
Candidate Name Rep. MIKE SIMPSON			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: ID District: 02			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Reynolds for Congress</b>		<b>Transaction ID:</b> 1144347095251 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 15388		Amount of Each Disbursement this Period 4000.00
City Rochester State NY Zip Code 14615	011 Category/ Type	
Purpose of Disbursement THOMAS REYNOLDS NY-026		
Candidate Name Rep. THOMAS M. REYNOLDS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Reynolds for Congress</b>		<b>Transaction ID:</b> 1144347082054 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 15388		Amount of Each Disbursement this Period 500.00
City Rochester State NY Zip Code 14615	011 Category/ Type	
Purpose of Disbursement THOMAS REYNOLDS NY-026		
Candidate Name Rep. THOMAS M. REYNOLDS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Feinstein for Senate</b>		<b>Transaction ID:</b> 1146166091967 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 601 S. Glenoaks Blvd. Suite 211		Amount of Each Disbursement this Period 1000.00
City Burbank State CA Zip Code 91502	011 Category/ Type	
Purpose of Disbursement DIANNE FEINSTEIN CA-000		
Candidate Name Sen. DIANNE FEINSTEIN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	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) ..... ▶	5500.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Mark Udall for Congress</b>		<b>Transaction ID:</b> 1144350502055 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 8690 Wolff Court #200		Amount of Each Disbursement this Period 1000.00
City Westminster State CO Zip Code 80031	Purpose of Disbursement MARK UDALL CO-002 Candidate Name Rep. MARK UDALL Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Re-Elect Brian Bilbray for Congress</b>		<b>Transaction ID:</b> 1145296079629 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 2466 Unicornio St.		Amount of Each Disbursement this Period 5000.00
City Carlsbad State CA Zip Code 92009	Purpose of Disbursement BRIAN BILBRAY CA-050 Candidate Name Rep BRIAN BILBRAY Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Re-Elect Brian Bilbray for Congress</b>		<b>Transaction ID:</b> 1145296048383 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 2466 Unicornio St.		Amount of Each Disbursement this Period 5000.00
City Carlsbad State CA Zip Code 92009	Purpose of Disbursement BRIAN BILBRAY CA-050 Candidate Name Rep BRIAN BILBRAY Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special Run-Off

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Lot of People for Dave Obey</b>		Transaction ID: 1146165436415 Date of Disbursement 04 / 27 / 2006	
Mailing Address 525 Washington St.		Amount of Each Disbursement this Period 1000.00	
City Wausau State WI Zip Code 54402	Purpose of Disbursement DAVE OBEY WI-007 Candidate Name Rep. DAVE OBEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011

Full Name (Last, First, Middle Initial) <b>B. Alan Mollohan for Congress Committee</b>		Transaction ID: 1144347379397 Date of Disbursement 04 / 06 / 2006	
Mailing Address PO Box 1343		Amount of Each Disbursement this Period 1000.00	
City Fairmont State WV Zip Code 26555	Purpose of Disbursement ALAN MOLLOHAN WV-001 Candidate Name Rep. ALAN B. MOLLOHAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011

Full Name (Last, First, Middle Initial) <b>C. Tom Feeny for Congress</b>		Transaction ID: 1145475742574 Date of Disbursement 04 / 19 / 2006	
Mailing Address 1420 Alafaya Trail #103		Amount of Each Disbursement this Period 1000.00	
City Oviedo State FL Zip Code 32765	Purpose of Disbursement TOM FEENEY FL-024 Candidate Name Rep. TOM FEENEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Feinstein for Senate</b>		Transaction ID: 1145296734422 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 601 S. Glenoaks Blvd. Suite 211		Amount of Each Disbursement this Period 1000.00
City Burbank State CA Zip Code 91502	Purpose of Disbursement DIANNE FEINSTEIN CA-000 Candidate Name Sen. DIANNE FEINSTEIN Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Feinstein for Senate</b>		Transaction ID: 1144350800274 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 601 S. Glenoaks Blvd. Suite 211		Amount of Each Disbursement this Period 1500.00
City Burbank State CA Zip Code 91502	Purpose of Disbursement DIANNE FEINSTEIN CA-000 Candidate Name Sen. DIANNE FEINSTEIN Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Mary Bono Committee</b>		Transaction ID: 1145299075369 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 3370		Amount of Each Disbursement this Period 500.00
City Palm Springs State CA Zip Code 92263	Purpose of Disbursement MARY BONO CA-045 Candidate Name Rep. MARY BONO Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Northup for Congress</b>		<b>Transaction ID:</b> 1145477410092 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6
Mailing Address PO Box 7313		Amount of Each Disbursement this Period -1000.00
City Louisville State KY Zip Code 40257	Check returned	
Purpose of Disbursement ANNE NORTHUP KY-003 Candidate Name Rep. ANNE M. NORTHUP Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011		

Full Name (Last, First, Middle Initial) <b>B. Abercrombie for Congress</b>		<b>Transaction ID:</b> 1144346874945 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 1357 Kapiolani Blvd. Suite 1005		Amount of Each Disbursement this Period 2000.00
City Honolulu State HI Zip Code 96814	Check returned	
Purpose of Disbursement NEIL ABERCROMBIE HI-001 Candidate Name Rep. NEIL ABERCROMBIE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011		

Full Name (Last, First, Middle Initial) <b>C. Fitzpatrick for Congress</b>		<b>Transaction ID:</b> 1144350173127 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 115 N. Broad St.		Amount of Each Disbursement this Period 3000.00
City Doylestown State PA Zip Code 18901	Check returned	
Purpose of Disbursement MICHAEL FITZPATRICK PA-008 Candidate Name Rep. MICHAEL G. FITZPATRICK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	4000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Fitzpatrick for Congress</b>		<b>Transaction ID:</b> 1144350156038 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 115 N. Broad St.		Amount of Each Disbursement this Period 2000.00
City Doylestown State PA Zip Code 18901	011 Category/ Type	
Purpose of Disbursement MICHAEL FITZPATRICK PA-008		
Candidate Name Rep. MICHAEL G. FITZPATRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kevin McCarthy for Congress</b>		<b>Transaction ID:</b> 1146168839179 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 455 Capitol Mall Suite 801		Amount of Each Disbursement this Period 5000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement KEVIN MCCARTHY CA-022		
Candidate Name Representative KEVIN MCCARTHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Schmidt for Congress</b>		<b>Transaction ID:</b> 1145995104279 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 771 Wards Corner Road		Amount of Each Disbursement this Period 2500.00
City Loveland State OH Zip Code 45140	011 Category/ Type	
Purpose of Disbursement JEAN SCHMIDT OH-002		
Candidate Name Rep. JEAN SCHMIDT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02	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) ..... ▶	9500.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial) <b>A. Sires for Congress</b>		<b>Transaction ID:</b> 1144348139116 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address 6050 Boulevard East Apt 6B		Amount of Each Disbursement this Period 2500.00
City West New York      State NJ      Zip Code 07093		
Purpose of Disbursement ALBIO SIRES NJ-013		011 Category/ Type
Candidate Name Representative ALBIO SIRES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ      District: 13		

Full Name (Last, First, Middle Initial) <b>B. Adrian Smith for Congress</b>		<b>Transaction ID:</b> 1144779907971 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6
Mailing Address 3321 Avenue I Suite 6		Amount of Each Disbursement this Period 5000.00
City Scottsbluff      State NE      Zip Code 69361		
Purpose of Disbursement ADRIAN SMITH NE-003		011 Category/ Type
Candidate Name Sen. ADRIAN M. SMITH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE      District: 03		

Full Name (Last, First, Middle Initial) <b>C. Peter Hoekstra for Congress</b>		<b>Transaction ID:</b> 1146168392323 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 1454 Cimarron Drive		Amount of Each Disbursement this Period 1000.00
City Holland      State MI      Zip Code 49423		
Purpose of Disbursement PETER HOEKSTRA MI-002		011 Category/ Type
Candidate Name Rep PETER HOEKSTRA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI      District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Credit Union Legislative Action Council of CUNA

Full Name (Last, First, Middle Initial)  
**A. Peter Hoekstra for Congress**

Mailing Address 1454 Cimarron Drive

City State Zip Code  
Holland MI 49423

Purpose of Disbursement  
PETER HOEKSTRA MI-002

Candidate Name  
Rep PETER HOEKSTRA

Office Sought:  House  
 Senate  
 President

State: MI District: 02

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Transaction ID: 1144767110805  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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