

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
The PMA Group, Inc. Political Action Committee

ADDRESS (number and street) 2345 Crystal Drive
Suite 300
 Check if different than previously reported. (ACC)
Arlington VA 22202

2. **FEC IDENTIFICATION NUMBER** C00280321
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 09 01 2008 through 09 30 2008

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

Type or Print Name of Treasurer Mr. Matthew L. Miller

Signature of Treasurer Electronically Filed by Mr. Matthew L. Miller Date 10 16 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
The PMA Group, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		17956.34
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	22063.52									
(c) Total Receipts (from Line 19)	12618.48	145778.66								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34682.00	163735.00								
7. Total Disbursements (from Line 31)	21000.00	150053.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13682.00	13682.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
The PMA Group, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12618.48	145358.66
(i) Itemized (use Schedule A)	0.00	420.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12618.48	145778.66
(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)	12618.48	145778.66
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12618.48	145778.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12618.48	145778.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	53.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	53.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21000.00	150000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	21000.00	150053.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21000.00	150053.00

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)	12618.48	145778.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12618.48	145778.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	53.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	53.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 20
(check only one)

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

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

NAME OF COMMITTEE (In Full)
The PMA Group, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) Paul Ted Anderson		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 5594 Norham Drive		Transaction ID: SA11AI.9570
City Alexandria	State VA	Zip Code 22310
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.66
Name of Employer The PMA Group, Inc.	Occupation Associate	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3333.28	

B.

Full Name (Last, First, Middle Initial) Joe Boessen		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 5406 Willcoxon Tavern Court		Transaction ID: SA11AI.9571
City Fairfax	State VA	Zip Code 22032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer The PMA Group, Inc.	Occupation Associate	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

C.

Full Name (Last, First, Middle Initial) Dan Cunningham		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 7808 Creekside View Lane		Transaction ID: SA11AI.9572
City Springfield	State VA	Zip Code 22153
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 415.00
Name of Employer The PMA Group, Inc.	Occupation Associate	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3320.00	

SUBTOTAL of Receipts This Page (optional)	▶	1031.66
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<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)
The PMA Group, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Richard Efford		Date of Receipt
	Mailing Address 6400 Velleity Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2008
	City	State	Zip Code
	Springfield	VA	22152
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9573
Name of Employer The PMA Group		Occupation Vice President, Defense	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 415.00
		<input type="text"/> 3340.00	Contribution

B.	Full Name (Last, First, Middle Initial) Roomiya Efford		Date of Receipt
	Mailing Address 6400 Velleity Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 19 / 2008
	City	State	Zip Code
	Springfield	VA	22152
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9590
Name of Employer Fairfax County Public Schools		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1500.00
		<input type="text"/> 5000.00	Contribution

C.	Full Name (Last, First, Middle Initial) Sean Fogarty		Date of Receipt
	Mailing Address 9506 Yawl Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 04 / 2008
	City	State	Zip Code
	Burke	VA	22015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9586
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 4000.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2915.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The PMA Group, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jennifer Gorham
Mailing Address 4669 Lawton Way, #304
City Alexandria State VA Zip Code 22311
FEC ID number of contributing federal political committee. **C**
Name of Employer The PMA Group, Inc. Occupation Legislative Assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.9574
Amount of Each Receipt this Period 50.00
Contribution

B. Full Name (Last, First, Middle Initial)
Mark Hamilton
Mailing Address 6305 Blackburn Ford Drive
City Fairfax Station State VA Zip Code 22039
FEC ID number of contributing federal political committee. **C**
Name of Employer The PMA Group Occupation Associate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3320.00
Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.9576
Amount of Each Receipt this Period 415.00
Contribution

C. Full Name (Last, First, Middle Initial)
John Hawkins
Mailing Address 2123 Apple Tree Lane
City Silver Spring State MD Zip Code 20905
FEC ID number of contributing federal political committee. **C**
Name of Employer The PMA Group, Inc. Occupation Associate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.9577
Amount of Each Receipt this Period 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 715.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The PMA Group, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lynn Henselman

Mailing Address 59 Beaver Lodge Road

City State Zip Code
Stafford VA 22556

FEC ID number of contributing federal political committee. C

Name of Employer: The PMA Group, Inc. Occupation: Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 03 / 2008

Transaction ID: SA11AI.9578

Amount of Each Receipt this Period 250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Melissa Koloszar

Mailing Address 1138 N. Jackson Street

City State Zip Code
Arlington VA 22201

FEC ID number of contributing federal political committee. C

Name of Employer: The PMA Group, Inc. Occupation: Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4707.50

Date of Receipt 09 / 03 / 2008

Transaction ID: SA11AI.9575

Amount of Each Receipt this Period 292.50

Contribution

C. Full Name (Last, First, Middle Initial)
Joseph S. Littleton, III, III

Mailing Address 79 Canterbury Drive

City State Zip Code
Stafford VA 22554

FEC ID number of contributing federal political committee. C

Name of Employer: The PMA Group, Inc. Occupation: Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 03 / 2008

Transaction ID: SA11AI.9585

Amount of Each Receipt this Period 500.00

Contribution

SUBTOTAL of Receipts This Page (optional) 1042.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<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)
The PMA Group, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kevin Miller	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 4220 Maple Ave	Transaction ID: SA11AI.9569
	City State Zip Code Fairfax VA 22032	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation PMA Group, Inc. Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2433.32	

B.	Full Name (Last, First, Middle Initial) Liz Roberts	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 211 11th Street, SE	Transaction ID: SA11AI.9579
	City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation The PMA Group Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4576.00	

C.	Full Name (Last, First, Middle Initial) Mr. Charles Smith	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 4021 Vacation Lane	Transaction ID: SA11AI.9580
	City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation The PMA Group, Inc. Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1520.00	

SUBTOTAL of Receipts This Page (optional)	▶	1266.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 20
	<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)
The PMA Group, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Joe Spata		Date of Receipt
	Mailing Address 7850 Vervain Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Springfield	VA	22152
	FEC ID number of contributing federal political committee.	C	Transaction ID: SA11AI.9581
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00
		<input type="text"/> 3200.00	Contribution

B.	Full Name (Last, First, Middle Initial) Brian Thiel		Date of Receipt
	Mailing Address 606 Second Street, #404		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.	C	Transaction ID: SA11AI.9587
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1250.00
		<input type="text"/> 2500.00	Contribution

C.	Full Name (Last, First, Middle Initial) Brian Thiel		Date of Receipt
	Mailing Address 606 Second Street, #404		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.	C	Transaction ID: SA11AI.9588
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1250.00
		<input type="text"/> 3750.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 20
	<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)
The PMA Group, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Scott VandeSand		Date of Receipt
	Mailing Address 6010 Washington Boulevard		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2008
	City	State	Zip Code
	Arlington	VA	22205
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9582
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3333.28	<input type="text"/> 416.66
Contribution			

B.	Full Name (Last, First, Middle Initial) Tom Veltri		Date of Receipt
	Mailing Address 713 Hawkins Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2008
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9583
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3333.28	<input type="text"/> 416.66
Contribution			

C.	Full Name (Last, First, Middle Initial) Glen Woods		Date of Receipt
	Mailing Address 5602 Meridian Hill Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2008
	City	State	Zip Code
	Burke	VA	22015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9589
Name of Employer The PMA Group, Inc.		Occupation Associate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	<input type="text"/> 1500.00
Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2333.32
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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NAME OF COMMITTEE (In Full)
The PMA Group, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Judith Zink		Date of Receipt		
	Mailing Address 606 Second Street, #404		M M / D D / Y Y Y Y 09 / 03 / 2008		
	City Alexandria	State VA	Zip Code 22314	Transaction ID: SA11AI.9584	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 415.00		
	Name of Employer The PMA Group, Inc.	Occupation Associate		Contribution	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3320.00			

SUBTOTAL of Receipts This Page (optional)	▶	415.00
TOTAL This Period (last page this line number only)	▶	12618.48

**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 14 / 20

<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)
The PMA Group, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) ALASKANS FOR DON YOUNG <hr/> Mailing Address P O BOX 100298 <hr/> City ANCHORAGE State AK Zip Code 99510 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9606 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 Category/Type

B. Full Name (Last, First, Middle Initial) CAPUANO FOR CONGRESS COMMITTEE <hr/> Mailing Address PO BOX 440305 <hr/> City SOMERVILLE State MA Zip Code 02144 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9595 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00 Category/Type

C. Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS <hr/> Mailing Address PO Box 442 <hr/> City Allentown State PA Zip Code 18105 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9603 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL 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)

PAGE 15 / 20

<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)
The PMA Group, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) CHET EDWARDS FOR CONGRESS Mailing Address PO BOX 23273 City WACO State TX Zip Code 76702 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9601 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type

B. Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE Mailing Address PO BOX 1776 City FREEDOM State PA Zip Code 15042 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9594 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type

C. Full Name (Last, First, Middle Initial) CONGRESSMAN BILL YOUNG CAMPAIGN COMMITTEE Mailing Address PO BOX 47025 City ST PETERSBURG State FL Zip Code 33743 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9599 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL 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)

<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)
The PMA Group, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS	Transaction ID: SB23.9605
	Mailing Address 38 Risley Road	Date of Disbursement 09 / 19 / 2008
	City: Vernon State: CT Zip Code: 06066	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement: Contribution Candidate Name: _____ Category/Type: _____	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEFAZIO FOR CONGRESS	Transaction ID: SB23.9596
	Mailing Address PO Box 1316	Date of Disbursement 09 / 09 / 2008
	City: Springfield State: OR Zip Code: 97477	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement: Contribution Candidate Name: _____ Category/Type: _____	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: SB23.9607
	Mailing Address P.O. BOX 37	Date of Disbursement 09 / 23 / 2008
	City: ST. CLAIR State: PA Zip Code: 17970	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement: Contribution Candidate Name: _____ Category/Type: _____	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
The PMA Group, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
KNOLLENBERG FOR CONGRESS COMMITTEE

Mailing Address 27867 ORCHARD LAKE ROAD

City FARMINGTON HILLS State MI Zip Code 48334

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MI District: 11

Transaction ID: SB23.9593

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MAJORITY IN CONGRESS PAC

Mailing Address 601 N Ferncreek Ave Suite 200

City Orlando State FL Zip Code 32803

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.9611

Date of Disbursement

09 / 23 / 2008

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
MATHESON FOR CONGRESS

Mailing Address 677 SOUTH 200 WEST SUITE A

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: UT District: 02

Transaction ID: SB23.9600

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 20

<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)
The PMA Group, Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) NORM DICKS FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO BOX 1663</p> <p>City TACOMA State WA Zip Code 98401</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9609 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) SESTAK FOR CONGRESS</p> <p>Mailing Address P.O. Box 16</p> <p>City Media State PA Zip Code 19063</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9608 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) SHERMAN FOR CONGRESS</p> <p>Mailing Address 555 SOUTH FLOWER STREET SUITE 4510</p> <p>City LOS ANGELES State CA Zip Code 90071</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9610 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<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)
The PMA Group, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
TEXANS FOR SENATOR JOHN CORNYN INC

Transaction ID: SB23.9598

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Mailing Address 6850 AUSTIN CENTRE BLVD
SUITE 180

Amount of Each Disbursement this Period

1000.00

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 00

B.

Full Name (Last, First, Middle Initial)
TODD AKIN FOR CONGRESS

Transaction ID: SB23.9602

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Mailing Address PO BOX 31222

Amount of Each Disbursement this Period

1000.00

City ST LOUIS State MO Zip Code 63131

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MO District: 02

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

21000.00
