

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
PMA Group 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 01 01 2007 through 01 31 2007

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 Joseph S. Littleton, III

Signature of Treasurer Electronically Filed by Joseph S. Littleton, III Date 02 15 2007

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
PMA Group Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">58062.80</td></tr></table>	58062.80
Y	Y	Y	Y									
2	0	0	7									
58062.80												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">58062.80</td></tr></table>	58062.80										
58062.80												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">37821.98</td></tr></table>	37821.98	<table border="1" style="width: 100%;"><tr><td align="right">37821.98</td></tr></table>	37821.98								
37821.98												
37821.98												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">95884.78</td></tr></table>	95884.78	<table border="1" style="width: 100%;"><tr><td align="right">95884.78</td></tr></table>	95884.78								
95884.78												
95884.78												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">41000.00</td></tr></table>	41000.00	<table border="1" style="width: 100%;"><tr><td align="right">41000.00</td></tr></table>	41000.00								
41000.00												
41000.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">54884.78</td></tr></table>	54884.78	<table border="1" style="width: 100%;"><tr><td align="right">54884.78</td></tr></table>	54884.78								
54884.78												
54884.78												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
PMA Group Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	3771.98	3771.98
(i) Itemized (use Schedule A)		
(ii) Unitemized	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	37821.98	37821.98
(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)	37821.98	37821.98
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))	37821.98	37821.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	37821.98	37821.98

DETAILED SUMMARY PAGE

of Disbursements

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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)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	41000.00	41000.00
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))..	41000.00	41000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	41000.00	41000.00

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)	37821.98	37821.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37821.98	37821.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Joe Boessen		Date of Receipt MM / DD / YYYY 01 / 04 / 2007
Mailing Address 5406 Willcoxon Tavern Court		Transaction ID: SA11A1.8559
City State Zip Code Fairfax VA 22032	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 ▼ 415.00	

Full Name (Last, First, Middle Initial) B. Leo Clark		Date of Receipt MM / DD / YYYY 01 / 04 / 2007
Mailing Address 4411 Santa Clara Court		Transaction ID: SA11A1.8574
City State Zip Code Fairfax VA 22030	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 415.00
Name of Employer The PMA Group	Occupation Associate	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

Full Name (Last, First, Middle Initial) C. Mrs. Becky DeRosa		Date of Receipt MM / DD / YYYY 01 / 09 / 2007
Mailing Address 22014 Foxlair Road		Transaction ID: SA11A1.8577
City State Zip Code Gaithersburg MD 20882	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
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 ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5830.00
TOTAL 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 / 23
	<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)
PMA Group Political Action Committee

A. Full Name (Last, First, Middle Initial)
Don Fleming

Mailing Address 6495 Powatan Knoll Court

City State Zip Code
Alexandria VA 22312

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 ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 09 / 2007

Transaction ID: SA11A1.8576

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Julie Giardina

Mailing Address 1162 N Randolph 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 ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2007

Transaction ID: SA11A1.8580

Amount of Each Receipt this Period
5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mark Hamilton

Mailing Address 6305 Blackburn Ford Drive

City State Zip Code
Fairfax Station VA 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 ▼ 415.00

Date of Receipt
MM / DD / YYYY
01 / 04 / 2007

Transaction ID: SA11A1.8562

Amount of Each Receipt this Period
415.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	10415.00
TOTAL 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 / 23
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Lynn Henselman		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 59 Beaver Lodge Road		Transaction ID: SA11A1.8563	
City State Zip Code Stafford VA 22556	Amount of Each Receipt this Period 416.66		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66		

Full Name (Last, First, Middle Initial) B. Pat Hiu		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 7	
Mailing Address 3652 Knox Court		Transaction ID: SA11A1.8582	
City State Zip Code Woodbridge VA 22193	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Gillian Jaeger		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 20748 Windmere Court		Transaction ID: SA11A1.8564	
City State Zip Code Potomac Falls VA 20165	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	5816.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 / 23
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Rich Kaelin		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 7
Mailing Address 13211 Dodie Drive		Transaction ID: SA11A1.8581
City State Zip Code Darnestown MD 20878	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Melissa Koloszar		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 7
Mailing Address 106 S Wise Street		Transaction ID: SA11A1.8560
City State Zip Code Arlington VA 22204	Amount of Each Receipt this Period 415.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

Full Name (Last, First, Middle Initial) C. Joseph S. Littleton, III, III		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 7
Mailing Address 79 Canterbury Drive		Transaction ID: SA11A1.8567
City State Zip Code Stafford VA 22554	Amount of Each Receipt this Period 415.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

SUBTOTAL of Receipts This Page (optional) ▶	5830.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 / 23
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Paul Magliocchetti		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 9 / 2 0 0 7	
Mailing Address 1221 South Eads Street, #1707		Transaction ID: SA11A1.8578	
City Arlington	State VA	Zip Code 22202	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Kevin Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 4220 Maple Ave		Transaction ID: SA11A1.8565	
City Fairfax	State VA	Zip Code 22032	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer PMA Group, Inc.	Occupation Associate		
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) C. Matt Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 229 10th Street, NE		Transaction ID: SA11A1.8568	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00		

SUBTOTAL of Receipts This Page (optional) ▶	5816.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 / 23
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Brian Morgan		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 8611 Mallard View		Transaction ID: SA11A1.8569	
City State Zip Code Fairfax Station VA 22039	Amount of Each Receipt this Period 415.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00		

Full Name (Last, First, Middle Initial) B. Liz Roberts		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 211 11th Street, SE		Transaction ID: SA11A1.8570	
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 The PMA Group	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00		

Full Name (Last, First, Middle Initial) C. Briggs Shade		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 7	
Mailing Address 8920 Colesbury Place		Transaction ID: SA11A1.8575	
City State Zip Code Fairfax VA 22031	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer The PMA Group, Inc.	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1331.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 / 23
	<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. Joe Spata		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 7
Mailing Address 7850 Vervain Court		Transaction ID: SA11A1.8558
City Springfield	State VA	Amount of Each Receipt this Period 400.00
Zip Code 22152	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
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. Brian Thiel		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 7
Mailing Address 12505 Lolly Post Lane		Transaction ID: SA11A1.8579
City Woodbridge	State VA	Amount of Each Receipt this Period 1500.00
Zip Code 22192	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Scott VandeSand		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 7
Mailing Address 6010 Washington Boulevard		Transaction ID: SA11A1.8571
City Arlington	State VA	Amount of Each Receipt this Period 416.66
Zip Code 22205	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer The PMA Group, Inc.	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66	

SUBTOTAL of Receipts This Page (optional)	▶	2316.66
TOTAL 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 13 / 23	
	(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)
PMA Group Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tom Veltri

Mailing Address 713 Hawkins Way

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
The PMA Group, Inc. Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
416.66

Date of Receipt
MM / DD / YYYY
01 / 04 / 2007

Transaction ID: SA11A1.8573

Amount of Each Receipt this Period
416.66

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	416.66
TOTAL This Period (last page this line number only)	▶	37771.98

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 / 23

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. ALAN MOLLOHAN FOR CONGRESS COMMITTEE		Transaction ID: SB23.8603 Date of Disbursement																				
Mailing Address PO BOX 1343		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	1		2	0	7														
City FAIRMONT	State WV	Zip Code 26555																				
Purpose of Disbursement General Debt RetirementContribution	<table border="1"><tr><td> </td></tr></table> Category/ Type																					
Candidate Name																						
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) ▼	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
State: WV District: 01																						

Full Name (Last, First, Middle Initial) B. ALLYSON SCHWARTZ FOR CONGRESS		Transaction ID: SB23.8617 Date of Disbursement																				
Mailing Address P.O. Box 45706		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	1		2	0	7														
City Philadelphia	State PA	Zip Code 19149																				
Purpose of Disbursement Contribution	<table border="1"><tr><td> </td></tr></table> Category/ Type																					
Candidate Name																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
State: PA District: 13																						

Full Name (Last, First, Middle Initial) C. BROWBACK FOR PRESIDENT EXPLORATORY COMMITTEE		Transaction ID: SB23.8599 Date of Disbursement																				
Mailing Address PO BOX 2008 2436 SW CAMELOT PLACE		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		3	1		2	0	7														
City TOPEKA	State KS	Zip Code 66601																				
Purpose of Disbursement Contribution	<table border="1"><tr><td> </td></tr></table> Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
State: District: 03																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 23

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. CARNEY FOR CONGRESS		Transaction ID: SB23.8609 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address PO Box A		Amount of Each Disbursement this Period 2000.00	
City Clarks Summit	State PA		Zip Code 18411
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA District: 10			

Full Name (Last, First, Middle Initial) B. CITIZENS FOR ALTMIRE		Transaction ID: SB23.8586 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 7	
Mailing Address PO BOX 1776		Amount of Each Disbursement this Period 2000.00	
City FREEDOM	State PA		Zip Code 15042
Purpose of Disbursement General Debt Retirement Contribution			Category/ Type
Candidate Name			
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: PA District: 04			

Full Name (Last, First, Middle Initial) C. CITIZENS FOR ARLEN SPECTER		Transaction ID: SB23.8592 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7	
Mailing Address 226 NORTH ALFRED STREET		Amount of Each Disbursement this Period 2000.00	
City ALEXANDRIA	State VA		Zip Code 22314
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA District: 00			

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. CITIZENS TO ELECT RICK LARSEN		Transaction ID: SB23.8601 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address PO Box 326		Amount of Each Disbursement this Period 1000.00
City Everett State WA Zip Code 98206	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. FEENEY, TOM		Transaction ID: SB23.8593 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7
Mailing Address 1420 Alafaya Trail #103		Amount of Each Disbursement this Period 1000.00
City Oviedo State FL Zip Code 32765	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. FRIENDS OF BUD CRAMER		Transaction ID: SB23.8590 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7
Mailing Address POB BOX 2621		Amount of Each Disbursement this Period 1000.00
City HUNTSVILLE State AL Zip Code 35801	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. FRIENDS OF JACK KINGSTON		Transaction ID: SB23.8629 Date of Disbursement
Mailing Address PO BOX 2133		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City SAVANNAH	State GA	Zip Code 31402
Purpose of Disbursement Contribution	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 01	
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

Full Name (Last, First, Middle Initial) B. FRIENDS OF JAY ROCKEFELLER		Transaction ID: SB23.8620 Date of Disbursement
Mailing Address PO BOX 1909		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City CHARLESTON	State WV	Zip Code 25327
Purpose of Disbursement Contribution	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV	District: 00	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) C. FRIENDS OF JIM CLYBURN		Transaction ID: SB23.8616 Date of Disbursement
Mailing Address Post Office Box 12567		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City Columbia	State SC	Zip Code 29211
Purpose of Disbursement Contribution	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 06	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. HEATHER WILSON FOR CONGRESS		Transaction ID: SB23.8597 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address PO BOX 14070		Amount of Each Disbursement this Period 1000.00
City ALBUQUERQUE State NM Zip Code 87191	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. IKE SKELTON FOR CONGRESS CMTE		Transaction ID: SB23.8598 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address P.O. Box A		Amount of Each Disbursement this Period 2000.00
City Harrisonville State MO Zip Code 64701	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. LEE TERRY FOR CONGRESS		Transaction ID: SB23.8595 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7
Mailing Address PO BOX 540098		Amount of Each Disbursement this Period 1000.00
City OMAHA State NE Zip Code 68154	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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 19 / 23

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. LINDSEY GRAHAM FOR SENATE		Transaction ID: SB23.8596 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7
Mailing Address PO BOX 1801		Amount of Each Disbursement this Period 1000.00
City COLUMBIA State SC Zip Code 29202	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. MATSUI FOR CONGRESS		Transaction ID: SB23.8627 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address PO BOX 1738		Amount of Each Disbursement this Period 1000.00
City SACRAMENTO State CA Zip Code 95812	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. MICA FOR CONGRESS		Transaction ID: SB23.8623 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address P. O. Box 181546		Amount of Each Disbursement this Period 1000.00
City Casselberry State FL Zip Code 32718	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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)

PAGE 20 / 23

<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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. MICHAUD FOR CONGRESS		Transaction ID: SB23.8602 Date of Disbursement																					
Mailing Address 213 Lisbon Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	7															
City Lewiston	State ME	Zip Code 04240	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		Category/ Type	1000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: ME	District: 02																						

Full Name (Last, First, Middle Initial) B. DAVID R OBEY		Transaction ID: SB23.8607 Date of Disbursement																					
Mailing Address 1212 Grand Ave #32		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	7															
City WAUSAU	State WI	Zip Code 54403	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		Category/ Type	2000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: WI	District: 07																						

Full Name (Last, First, Middle Initial) C. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN		Transaction ID: SB23.8611 Date of Disbursement																					
Mailing Address PO BOX 3662		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	7															
City SEATTLE	State WA	Zip Code 98199	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		Category/ Type	1000.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: WA	District: 00																						

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)

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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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial)

A. PRICE FOR CONGRESS COMMITTEE

Mailing Address P. O. Box 1986

City Raleigh State NC Zip Code 27602

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 04

Transaction ID: SB23.8614

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ROTHMAN, STEVEN R

Mailing Address Court Plaza North
25 Main Street

City Hackensack State NJ Zip Code 07602

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 09

Transaction ID: SB23.8632

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SHERMAN FOR CONGRESS

Mailing Address 555 SOUTH FLOWER STREET SUITE 4510

City LOS ANGELES State CA Zip Code 90071

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 24

Transaction ID: SB23.8628

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. SULLIVAN, JOHN		Transaction ID: SB23.8624 Date of Disbursement 01 / 31 / 2007	
Mailing Address 1643 East 44 Street		Amount of Each Disbursement this Period 1000.00	
City Tulsa State OK Zip Code 47105	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. TEAM SUNUNU		Transaction ID: SB23.8622 Date of Disbursement 01 / 31 / 2007	
Mailing Address PO BOX 500		Amount of Each Disbursement this Period 1000.00	
City RYE State NH Zip Code 03870	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. TIAHRT FOR CONGRESS		Transaction ID: SB23.8612 Date of Disbursement 01 / 31 / 2007	
Mailing Address 2250 N ROCK RD #118A		Amount of Each Disbursement this Period 2000.00	
City WICHITA State KS Zip Code 67226	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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)

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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)
PMA Group Political Action Committee

Full Name (Last, First, Middle Initial) A. TODD AKIN FOR CONGRESS		Transaction ID: SB23.8591	
Mailing Address PO BOX 31222		Date of Disbursement 01 / 17 / 2007	
City ST LOUIS	State MO	Zip Code 63131	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MO	District: 02		

Full Name (Last, First, Middle Initial) B. Visclosky, Pete		Transaction ID: SB23.8630	
Mailing Address Visclosky for Congress Cmte. 1572 N. 21st Court		Date of Disbursement 01 / 31 / 2007	
City Arlington	State VA	Zip Code 22209	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IN	District: 1		

Full Name (Last, First, Middle Initial) C. WALTER JONES FOR CONGRESS COMMITTEE (2008)		Transaction ID: SB23.8626	
Mailing Address PO BOX 99667		Date of Disbursement 01 / 31 / 2007	
City RALEIGH	State NC	Zip Code 27624	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NC	District: 03		

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	41000.00