

# 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  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

ADDRESS (number and street) 1101 30TH STREET NW SUITE 300  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20007

2. **FEC IDENTIFICATION NUMBER** C00236778  
**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 04 01 2008 through 06 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. Paul Cullen

Signature of Treasurer Electronically Filed by Mr. Paul Cullen Date 07 14 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

**OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)**

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

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		131793.50
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	57133.02									
(c) Total Receipts (from Line 19) .....	61650.03	66138.66								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	118783.05	197932.16								
7. Total Disbursements (from Line 31) .....	53155.56	132304.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	65627.49	65627.49								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

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	4050.00	4555.00
(i) Itemized (use Schedule A) .....	57340.43	60487.57
(ii) Unitemized .....	61390.43	65042.57
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	61390.43	65042.57
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.) .....	259.60	1096.09
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)) .....	61650.03	66138.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	61650.03	66138.66

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	155.56	304.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	155.56	304.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52000.00	131000.00
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.....	1000.00	1000.00
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))..	53155.56	132304.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53155.56	132304.67

**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 .....	61390.43	65042.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	61390.43	65042.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	155.56	304.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	155.56	304.67

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<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)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) KENNETH BECKER		Date of Receipt
	Mailing Address 2764 SHAMROCK CIR		<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 0 5 / 1 2 / 2 0 0 8
	City	State	Zip Code
	MONTGOMERY	TX	77316-4603
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.34096
Name of Employer Self-employed		Occupation Owner-Operator	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Other		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) L TERRY BUTTON		Date of Receipt
	Mailing Address PO BOX 223		<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 0 5 / 1 2 / 2 0 0 8
	City	State	Zip Code
	RUSHVILLE	NY	14544-0223
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.34093
Name of Employer Self-employed		Occupation Owner-Operator	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Other		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) D ROGER CUSTER		Date of Receipt
	Mailing Address 3944 NE 167TH ST APT 405		<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 0 5 / 2 9 / 2 0 0 8
	City	State	Zip Code
	NORTH MIAMI BEACH	FL	33160-3573
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.34922
Name of Employer Self-employed		Occupation Owner-Operator	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1050.00
<b>TOTAL</b> 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 7 / 29
	<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)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) RENE DALPE		Date of Receipt MM / DD / YYYY 05 / 30 / 2008		
	Mailing Address 12937 N BELLWOOD DR		<b>Transaction ID:</b> SA11AI.35302		
	City HOLLAND	State MI	Zip Code 49424-9285	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed Occupation Owner-Operator				
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 350.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) ALAN DILTS		Date of Receipt MM / DD / YYYY 05 / 28 / 2008		
	Mailing Address 10902 DOROTHY DR		<b>Transaction ID:</b> SA11AI.34649		
	City ODESSA	State MO	Zip Code 64076	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed Occupation Owner-Operator				
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 270.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) C JOSEPH HOOVER		Date of Receipt MM / DD / YYYY 06 / 03 / 2008		
	Mailing Address PO BOX 824		<b>Transaction ID:</b> SA11AI.35085		
	City BOLIVAR	State MO	Zip Code 65613	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed Occupation Owner-Operator				
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 29
	<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)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) S JOHN KARLOVEC		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 1367 GLENN AVE		<b>Transaction ID:</b> SA11AI.34850		
	City COLUMBUS	State OH	Zip Code 43212-3232	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed Occupation Owner-Operator		Aggregate Year-to-Date 300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) L RICHARD LYNAM		Date of Receipt MM / DD / YYYY 06 / 19 / 2008		
	Mailing Address 540 WENDT ST		<b>Transaction ID:</b> SA11AI.35568		
	City EAST DUNDEE	State IL	Zip Code 60118-2424	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed Occupation Owner-Operator		Aggregate Year-to-Date 650.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) R JOHN OOSTERHOFF		Date of Receipt MM / DD / YYYY 05 / 19 / 2008		
	Mailing Address 10570 THOMPSON RD PO BOX 240		<b>Transaction ID:</b> SA11AI.34204		
	City FREEPORT	State MI	Zip Code 49325-9608	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-employed Occupation Owner-Operator		Aggregate Year-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 9 / 29</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<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)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

**A.**

Full Name (Last, First, Middle Initial) RAY DANNY SCHNAUTZ		Date of Receipt
Mailing Address PO BOX 5546		<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 06 / 19 / 2008
City	State	Zip Code
PASADENA	TX	77508-5250
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.35521
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 150.00
Name of Employer Self-employed	Occupation	
	Owner-Operator	
Receipt For: 2008	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 350.00	
<input checked="" type="checkbox"/> Other (specify) ▼ Other		

**B.**

Full Name (Last, First, Middle Initial) E LEONARD TROLL		Date of Receipt
Mailing Address 18501 R DR N		<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 05 / 27 / 2008
City	State	Zip Code
MARSHALL	MI	49068-9416
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.34633
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 1000.00
Name of Employer Self-employed	Occupation	
	Owner-Operator	
Receipt For: 2008	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 1000.00	
<input checked="" type="checkbox"/> Other (specify) ▼ Other		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 4050.00

**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 / 29
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt
	Mailing Address PO Box 609		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15230-9738
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.33860
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="932.12"/>	<input type="text" value="95.63"/>
			Bank Interest

<b>B.</b>	Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt
	Mailing Address PO Box 609		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15230-9738
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.33861
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1011.90"/>	<input type="text" value="79.78"/>
			Bank Interest

<b>C.</b>	Full Name (Last, First, Middle Initial) PNC Bank		Date of Receipt
	Mailing Address PO Box 609		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15230-9738
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.33862
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1096.09"/>	<input type="text" value="84.19"/>
			Bank Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="259.60"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="259.60"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) PNC Bank	Transaction ID: SB21B.33863
	Mailing Address PO Box 609	Date of Disbursement 04 / 30 / 2008
	City Pittsburgh State PA Zip Code 15230-9738	Amount of Each Disbursement this Period 54.29
	Purpose of Disbursement Bank Service Charge Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PNC Bank	Transaction ID: SB21B.33864
	Mailing Address PO Box 609	Date of Disbursement 05 / 31 / 2008
	City Pittsburgh State PA Zip Code 15230-9738	Amount of Each Disbursement this Period 49.32
	Purpose of Disbursement Bank service Charge Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PNC Bank	Transaction ID: SB21B.33865
	Mailing Address PO Box 609	Date of Disbursement 06 / 30 / 2008
	City Pittsburgh State PA Zip Code 15230-9738	Amount of Each Disbursement this Period 51.95
	Purpose of Disbursement Bank service charge Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>155.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>155.56</b>

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

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

FOR LINE NUMBER: (check only one)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

**A.** Full Name (Last, First, Middle Initial)  
BILL SHUSTER FOR CONGRESS

Mailing Address PO Box 27

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement Contribution

011  
Category/  
Type

Candidate Name  
WILLIAM F SHUSTER

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Transaction ID: SB23.33866  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
BOSWELL FOR CONGRESS

Mailing Address PO Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement Contribution

011  
Category/  
Type

Candidate Name  
LEONARD L. BOSWELL

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

Transaction ID: SB23.33870  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

Mailing Address P. O. Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement Contribution

Category/  
Type

Candidate Name  
ERIC CANTOR

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: VA District: 07

Transaction ID: SB23.33873  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>CAPUANO FOR CONGRESS COMMITTEE</b></p> <p>Mailing Address <b>PO BOX 440305</b></p> <p>City <b>SOMERVILLE</b> State <b>MA</b> Zip Code <b>02144</b></p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name <b>MICHAEL E CAPUANO</b></p> <p>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: <b>MA</b> District: <b>08</b></p>	<p><b>Transaction ID:</b> SB23.33876 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1500.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>CARNEY FOR CONGRESS</b></p> <p>Mailing Address <b>P.O. Box A</b></p> <p>City <b>Clarks Summit</b> State <b>PA</b> Zip Code <b>18411</b></p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name <b>CHRISTOPHER CARNEY</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>PA</b> District: <b>10</b></p>	<p><b>Transaction ID:</b> SB23.33879 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">28</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>CHET EDWARDS FOR CONGRESS</b></p> <p>Mailing Address <b>PO Box 23273</b></p> <p>City <b>WACO</b> State <b>TX</b> Zip Code <b>76702</b></p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name <b>CHET EDWARDS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>TX</b> District: <b>17</b></p>	<p><b>Transaction ID:</b> SB23.33882 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="border: 1px solid black; padding: 5px; display: inline-block;">3500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px; display: inline-block;"> </span>

**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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

**A.** Full Name (Last, First, Middle Initial)  
CIRO D. RODRIGUEZ FOR CONGRESS

Mailing Address PO Box 14528

City San Antonio State TX Zip Code 78214

Purpose of Disbursement  
Contribution

Candidate Name  
CIRO D. RODRIGUEZ

Office Sought:  House  
 Senate  
 President

State: TX District: 23

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.33885

Date of Disbursement

05 / 16 / 2008

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR TOM PETRI

Mailing Address P.O. Box 270

City Fond du Lac State WI Zip Code 54936

Purpose of Disbursement  
Contribution

Candidate Name  
TOM PETRI

Office Sought:  House  
 Senate  
 President

State: WI District: 06

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.33888

Date of Disbursement

05 / 16 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CITIZENS TO ELECT RICK LARSEN

Mailing Address PO Box 326

City Everett State WA Zip Code 98206

Purpose of Disbursement  
Contribution

Candidate Name  
RICK LARSEN

Office Sought:  House  
 Senate  
 President

State: WA District: 02

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.33891

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

1000.00

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

5000.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) <b>CLEAVER FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.33894
	Mailing Address 4801 Main Street, Stuite 1000	Date of Disbursement 06 / 10 / 2008
	City KANSAS CITY State MO Zip Code 64112	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name EMANUEL CLEAVER II	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) <b>COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS</b>	<b>Transaction ID:</b> SB23.33897
	Mailing Address 315 Inspiration Lane	Date of Disbursement 06 / 18 / 2008
	City Gaithersburg State MD Zip Code 20878	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name NYDIA M VELAZQUEZ	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) <b>DAN LIPINSKI FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.34030
	Mailing Address 5838 SOUTH ARCHER AVENUE	Date of Disbursement 05 / 27 / 2008
	City CHICAGO State IL Zip Code 60638	Amount of Each Disbursement this Period -1000.00
	Purpose of Disbursement Contribution VOID 5/14/07 Candidate Name DANIEL WILLIAM LIPINSKI	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1000.00

**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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DEFAZIO FOR CONGRESS</b>  Mailing Address <b>PO Box 1316</b>  City <b>Springfield</b> State <b>OR</b> Zip Code <b>97477</b> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name <b>PETER A DEFAZIO</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>OR</b> District: <b>04</b>	Transaction ID: <b>SB23.33901</b> Date of Disbursement M M / D D / Y Y Y Y <b>0 5 / 1 2 / 2 0 0 8</b>  Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>  Mailing Address <b>430 South Capitol Street, SE 2nd Floor</b>  City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: <b>SB23.33904</b> Date of Disbursement M M / D D / Y Y Y Y <b>0 5 / 1 6 / 2 0 0 8</b>  Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</b>  Mailing Address <b>120 MARYLAND AVENUE NE</b>  City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20002</b> Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: <b>SB23.33906</b> Date of Disbursement M M / D D / Y Y Y Y <b>0 6 / 2 3 / 2 0 0 8</b>  Amount of Each Disbursement this Period 2000.00

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

**8000.00**

**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 17 / 29

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) DUNCAN FOR CONGRESS		Transaction ID: SB23.33908	
	Mailing Address PO BOX 2646		Date of Disbursement 05 / 05 / 2008	
	City KNOXVILLE	State TN	Zip Code 37901	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name JOHN REP. JR. DUNCAN				
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: TN	District: 02			
<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID		Transaction ID: SB23.33911	
	Mailing Address P.O. BOX 19163		Date of Disbursement 05 / 05 / 2008	
	City LAS VEGAS	State NV	Zip Code 89132	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name HARRY REID				
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: NV	District: 00			
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BENNIE THOMPSON		Transaction ID: SB23.33914	
	Mailing Address P.O. Box 100 P.O. Box 100		Date of Disbursement 05 / 16 / 2008	
	City Bolton	State MS	Zip Code 39041	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name BENNIE G THOMPSON				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MS	District: 02			

**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)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: SB23.33917 Date of Disbursement 06 / 12 / 2008
	Mailing Address 18 N. SECOND ST., BOX 37 PO BOX 37	Amount of Each Disbursement this Period 1000.00
	City SAINT CLAIR State PA Zip Code 17970	
	Purpose of Disbursement Contribution Candidate Name T. TIMOTHY HOLDEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARROW	Transaction ID: SB23.33920 Date of Disbursement 05 / 05 / 2008
	Mailing Address PO Box 8166	Amount of Each Disbursement this Period 1000.00
	City Savannah State GA Zip Code 31412	
	Purpose of Disbursement Contribution Candidate Name JOHN J BARROW Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) FRIENDS OF RAHM EMANUEL	Transaction ID: SB23.33923 Date of Disbursement 06 / 18 / 2008
	Mailing Address P.O. Box 101124	Amount of Each Disbursement this Period 1000.00
	City Chicago State IL Zip Code 60610	
	Purpose of Disbursement Contribution Candidate Name RAHM EMANUEL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 05	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF ROY BLUNT</b>	<b>Transaction ID:</b> SB23.34026 Date of Disbursement 05 / 27 / 2008	
	Mailing Address PO Box 50100 PO Box 50100		
	City Springfield State MO Zip Code 65805	Amount of Each Disbursement this Period -500.00	
	Purpose of Disbursement VOID 9/15/04 Candidate Name	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF SHERROD BROWN</b>	<b>Transaction ID:</b> SB23.33926 Date of Disbursement 06 / 30 / 2008	
	Mailing Address PO BOX 76187 Suite 800		
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name SHERROD BROWN	Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF TIM JOHNSON</b>	<b>Transaction ID:</b> SB23.33929 Date of Disbursement 06 / 06 / 2008	
	Mailing Address PO Box 17097		
	City Urbana State IL Zip Code 61803	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name TIM JOHNSON	Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

1500.00

**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 / 29

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

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

NAME OF COMMITTEE (In Full)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>GENE TAYLOR FOR CONGRESS COMMITTEE</b></p> <p>Mailing Address <b>POST OFFICE BOX 3838 POST OFFICE BOX 38</b></p> <p>City <b>BAY ST LOIS</b> State <b>MS</b> Zip Code <b>39520</b></p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name <b>GENE MR. TAYLOR</b> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2008 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>MS</b> District: <b>04</b></p>	<p><b>Transaction ID:</b> SB23.33932 <b>Date of Disbursement</b> 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>GLACIER PAC</b></p> <p>Mailing Address <b>236 Massachusetts Avenue, NE Suite 603</b></p> <p>City <b>Washington</b> State <b>DC</b> Zip Code <b>20002</b></p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB23.33938 <b>Date of Disbursement</b> 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>HAL ROGERS FOR CONGRESS</b></p> <p>Mailing Address <b>P.O. BOX 1214 EAST MT VERNON ST</b></p> <p>City <b>SOMERSET</b> State <b>KY</b> Zip Code <b>42502</b></p> <p>Purpose of Disbursement Contribution VOID 7/7/06 <input type="checkbox"/> Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House Disbursement For: <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>KY</b> District: <b>05</b></p>	<p><b>Transaction ID:</b> SB23.34028 <b>Date of Disbursement</b> 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period -2000.00</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)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

**A.** Full Name (Last, First, Middle Initial)  
HARRY MITCHELL FOR CONGRESS

Mailing Address PO Box 23748

City State Zip Code  
Tempe AZ 85285

Purpose of Disbursement  
Contribution

Candidate Name  
HARRY E MITCHELL

Office Sought:  House  
 Senate  
 President  
State: AZ District: 05

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.33940  
Date of Disbursement

05 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
JOHN KERRY FOR SENATE

Mailing Address 10 G STREET NE  
SUITE 710

City State Zip Code  
WASHINGTON DC 20002

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN FORBES KERRY

Office Sought:  House  
 Senate  
 President  
State: MA District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.33946  
Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
JOHN KERRY FOR SENATE

Mailing Address 10 G STREET NE  
SUITE 710

City State Zip Code  
WASHINGTON DC 20002

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MA District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.33949  
Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

2000.00

011  
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)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>KAGEN 4 CONGRESS</b>  Mailing Address 100 W. College Ave. 50 D  City Appleton State WI Zip Code 54911  Purpose of Disbursement Contribution Candidate Name STEVEN L KAGEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.33951</b> Date of Disbursement 05 / 16 / 2008	Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>KAGEN 4 CONGRESS</b>  Mailing Address 100 W. College Ave. 50 D  City Appleton State WI Zip Code 54911  Purpose of Disbursement Contribution Candidate Name STEVEN L KAGEN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.33954</b> Date of Disbursement 05 / 16 / 2008	Amount of Each Disbursement this Period 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>KAY BAILEY HUTCHISON FOR SENATE COMMITTEE</b>  Mailing Address PO BOX 9190  City DALLAS State TX Zip Code 75209  Purpose of Disbursement Contribution Candidate Name KAY BAILEY HUTCHISON Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.33957</b> Date of Disbursement 06 / 23 / 2008	Amount of Each Disbursement this Period 2000.00

**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)

<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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>KLOBUCHAR FOR MINNESOTA 2012</b>	<b>Transaction ID:</b> SB23.33961 Date of Disbursement 06 / 18 / 2008	
	Mailing Address PO BOX 4146		
	City ST PAUL	State MN	Zip Code 55104
	Purpose of Disbursement Contribution	011 Category/ Type	
	Candidate Name AMY J KLOBUCHAR		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MN District: 00		
			Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>KUHL FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.33965 Date of Disbursement 04 / 15 / 2008	
	Mailing Address 10 GANESVOORT STREET SUITE 101		
	City BATH	State NY	Zip Code 14810
	Purpose of Disbursement Contribution	011 Category/ Type	
	Candidate Name JOHN KUHL		
	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: NY District: 29		
			Amount of Each Disbursement this Period 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>KUHL FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.33968 Date of Disbursement 04 / 15 / 2008	
	Mailing Address 10 GANESVOORT STREET SUITE 101		
	City BATH	State NY	Zip Code 14810
	Purpose of Disbursement Contribution	Category/ Type	
	Candidate Name JOHN KUHL		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 29		
			Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) LISA MURKOWSKI FOR US SENATE</p> <p>Mailing Address PO BOX 100847</p> <p>City ANCHORAGE State AK Zip Code 99510</p> <p>Purpose of Disbursement VOID 9/15/04</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.34024 <b>Date of Disbursement</b> 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MARIO DIAZ-BALART FOR CONGRESS</p> <p>Mailing Address 95 Merrick Way, Suite 250</p> <p>City Coral Gables State FL Zip Code 33134</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name MARIO DIAZ-BALART</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.33971 <b>Date of Disbursement</b> 05 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MARION BERRY FOR CONGRESS</p> <p>Mailing Address P.O. BOX 8084 P.O. BOX 8084</p> <p>City JONESBORO State AR Zip Code 72403</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name MARION BERRY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.33974 <b>Date of Disbursement</b> 05 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MCNERNEY FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.33977 Date of Disbursement 04 / 15 / 2008	
	Mailing Address 6520 Village Parkway Second Floor		
	City Dublin State CA Zip Code 94568	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name JERRY MCNERNEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MICHAUD FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.33980 Date of Disbursement 05 / 16 / 2008	
	Mailing Address 213 Lisbon Street		
	City Lewiston State ME Zip Code 04240	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name MICHAEL H MICHAUD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MIKE HONDA FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.33983 Date of Disbursement 04 / 15 / 2008	
	Mailing Address P.O. Box 8180		
	City San Jose State CA Zip Code 95155	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name MIKE HONDA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 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)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

**A.** Full Name (Last, First, Middle Initial)  
**TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address P. O. Box 11586

City Washington State DC Zip Code 20008

Purpose of Disbursement VOID 10/18/07

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB23.34032

Date of Disbursement

05 / 27 / 2008

Amount of Each Disbursement this Period

-1500.00

**B.** Full Name (Last, First, Middle Initial)  
**VOINOVICH FOR SENATE COMMITTEE**

Mailing Address 865 MACON ALLEY

City COLUMBUS State OH Zip Code 43206

Purpose of Disbursement Contribution

Candidate Name GEORGE V VOINOVICH

011

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: OH District: 00

Transaction ID: SB23.34004

Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ZACK SPACE FOR CONGRESS COMMITTEE**

Mailing Address 123 West High Avenue

City New Philadelphia State OH Zip Code 44663

Purpose of Disbursement Contribution

Candidate Name ZACHARY T SPACE

011

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: OH District: 18

Transaction ID: SB23.34007

Date of Disbursement

06 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

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

500.00

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

52000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 29

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

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NAME OF COMMITTEE (In Full)

OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITICAL ACTION COMMITTEE (AKA OOID-A-PAC)

**A.** Full Name (Last, First, Middle Initial)  
Bob Erlich for Maryland Committee

Mailing Address P.O. Box 3

City State Zip Code  
Severna Park MD 21146

Purpose of Disbursement  
VOID 10/24/06

Candidate Name  
ROBERT LEROY JR EHRlich

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: MD District: 02

Transaction ID: SB29.34017

Date of Disbursement

05 / 27 / 2008

Amount of Each Disbursement this Period

-500.00

**B.** Full Name (Last, First, Middle Initial)  
House Republican Campaign Committee

Mailing Address P.O. Box 11787

City State Zip Code  
Harrisburg PA 17101

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.34011

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

1500.00

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

1000.00

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

1000.00