

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		699737.41
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	659810.51									
(c) Total Receipts (from Line 19)	90630.57	350657.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	750441.08	1050394.95								
7. Total Disbursements (from Line 31)	96864.31	396818.18								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	653576.77	653576.77								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	62502.97									

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

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	32429.23	78209.53
(ii) Unitemized	58201.34	266948.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)	90630.57	345157.54
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	90630.57	350157.54
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	500.00
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))	90630.57	350657.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	90630.57	350657.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1364.31	70738.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1364.31	70738.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	95500.00	325000.00
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	1079.50
(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	1079.50
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))..	96864.31	396818.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96864.31	396818.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 120

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)	90630.57	350157.54
34. Total Contribution Refunds (from Line 28(d))	0.00	1079.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90630.57	349078.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1364.31	70738.68
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1364.31	70738.68

**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 / 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Henry L Prien	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 415 38th St S Ste E	Transaction ID: 9174756
	City State Zip Code Fargo ND 58103-1190	Amount of Each Receipt this Period 50.40
	FEC ID number of contributing federal political committee. C	
Name of Employer American Family Life Insurance Co.	Occupation District Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

B.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Wells	Date of Receipt MM / DD / YYYY 05 / 03 / 2010
	Mailing Address 18830 Los Hermanos Ranch Rd	Transaction ID: 9174766
	City State Zip Code Valley Center CA 92082-6808	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Daniel Wells Insurance & Financial Ser	Occupation Owner/Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.50	

C.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Scholz	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 3619 S 55th St	Transaction ID: 9174806
	City State Zip Code Omaha NE 68106-4415	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Ameritas Life Insurance	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.40
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Paul R. Decker

Mailing Address Box 1832

City State Zip Code
Idaho Falls ID 83403-1832

FEC ID number of contributing federal political committee. C

Name of Employer Beneficial Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9174808

Amount of Each Receipt this Period 50.40

B. Full Name (Last, First, Middle Initial)
Mr. William K. McGreevy

Mailing Address 4705 South Lewis Avenue

City State Zip Code
Sioux Falls SD 57103-5413

FEC ID number of contributing federal political committee. C

Name of Employer Union Central Life Insurance Company Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 187.50

Date of Receipt 05 / 06 / 2010
Transaction ID: 9174830

Amount of Each Receipt this Period 187.50

C. Full Name (Last, First, Middle Initial)
Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. C

Name of Employer NAIFA Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.25

Date of Receipt 05 / 07 / 2010
Transaction ID: 9174848

Amount of Each Receipt this Period 52.25

SUBTOTAL of Receipts This Page (optional) 290.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 120
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Timothy A. Campbell

Mailing Address 1048 N Washington Ave.

City Madison State SD Zip Code 57042-1101

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

Name of Employer Thrivent Financial for Lutherans
Occupation Financial Services Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 06 / 2010
Transaction ID: 9174854
Amount of Each Receipt this Period 350.00

B.

Full Name (Last, First, Middle Initial)
Mr. Larry J. Ottenbacher

Mailing Address 705 11th St P O Box 548

City Eureka State SD Zip Code 57437

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

Name of Employer Modern Woodmen of America
Occupation District Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt 05 / 06 / 2010
Transaction ID: 9174858
Amount of Each Receipt this Period 30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ronald D. Brant

Mailing Address 10234 Hoffman

City Maybee State MI Zip Code 48159-9777

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

Name of Employer Lincoln Financial Network
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9174872
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 430.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 120
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. James W. Oglesby

Mailing Address 800-E Fairview Rd.
Box 136

City Asheville State NC Zip Code 28803-1011

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

Name of Employer J.W. Oglesby & Associates Occupation Senior Sales Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 803.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9174882

Amount of Each Receipt this Period
165.00

B.

Full Name (Last, First, Middle Initial)
Mr. William K. McGreevy

Mailing Address 4705 South Lewis Avenue

City Sioux Falls State SD Zip Code 57103-5413

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

Name of Employer Union Central Life Insurance Company Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt
MM / DD / YYYY
05 / 06 / 2010

Transaction ID: 9174894

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Mr. Samuel S. Lindenberg

Mailing Address 124 Woodridge Drive

City Harrisburg State PA Zip Code 17110-9511

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

Name of Employer Team Financial Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2010

Transaction ID: 9174910

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶ **440.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Samuel S. Lindenberg

Mailing Address 124 Woodridge Drive

City State Zip Code
Harrisburg PA 17110-9511

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

Name of Employer Team Financial Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2010

Transaction ID: 9174912

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Larry J. Ottenbacher

Mailing Address 705 11th St P O Box 548

City State Zip Code
Eureka SD 57437

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

Name of Employer Modern Woodmen of America Occupation District Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2010

Transaction ID: 9174920

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Walter C. Sprye, Jr.

Mailing Address 1305 Portside Drive

City State Zip Code
Wilmington NC 28405

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

Name of Employer AXA Advisors, LLC Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9174956

Amount of Each Receipt this Period
46.20

SUBTOTAL of Receipts This Page (optional) ► **346.20**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Leslie J. Tinseth

Mailing Address 264 Rosewood

City State Zip Code
Kalispell MT 59901

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

Name of Employer
Tinseth and Assoc Ins

Occupation
Agent/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9174966

Amount of Each Receipt this Period
234.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric S. Roth

Mailing Address 2 Mckinley Ct.

City State Zip Code
Monroe Twp NJ 08831-4055

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

Name of Employer
Smith Barney

Occupation
Vice President- Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9174972

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Ms. Laurie A. Adams

Mailing Address 609 E. Jefferson

City State Zip Code
Washington IL 61571-1551

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

Name of Employer
Country Financial

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9174982

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **318.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Randy L. Scritchfield

Mailing Address 10105 Nightingale St.

City State Zip Code
Gaithersburg MD 20882-4019

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

Name of Employer Occupation
Montgomery Financial Group, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 9174988

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Frank H. Briggs, Jr.

Mailing Address 2610 Bohler Rd NW

City State Zip Code
Atlanta GA 30327-1418

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

Name of Employer Occupation
Briggs & Associates/AXA Advisors, LLC Financial Consultant

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 9174998

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City State Zip Code
Landenberg PA 19350

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

Name of Employer Occupation
Edward A. Zabielski Jr & Co. President/Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt

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

Transaction ID: 9175004

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mrs. Lynda D. Turner

Mailing Address 1070 S Bosque Loop

City State Zip Code
Bosque Farms NM 87068-9063

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

Name of Employer Occupation
AXA Advisors, LLC Registered Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 213.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175006

Amount of Each Receipt this Period
51.00

B. Full Name (Last, First, Middle Initial)
Mr. William J. Lynch

Mailing Address 5075 SW Griffith Dr. #200

City State Zip Code
Beaverton OR 97005

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

Name of Employer Occupation
Farmers Insurance General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175082

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. H. Keith de Noble

Mailing Address 36308 Highway 300

City State Zip Code
Bigelow AR 72016

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

Name of Employer Occupation
H. Keith de Noble Ins. Agency, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175102

Amount of Each Receipt this Period
51.00

SUBTOTAL of Receipts This Page (optional) ► 152.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Bryon A. Holz

Mailing Address 207 Cindy Ln

City State Zip Code
Brandon FL 33510-3905

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

Name of Employer Occupation
Bryon Holz & Associates Independent Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9175104

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln
PO Box 2433

City State Zip Code
Cody WY 82414-2433

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

Name of Employer Occupation
Taggart Company General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 9175110

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona

Mailing Address 141 Greenway Road

City State Zip Code
Lido Beach NY 11561-4828

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

Name of Employer Occupation
D'Addona Rosenbaum General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1040.00

Date of Receipt

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

Transaction ID: 9175122

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional) ▶

300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 120
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Carol A. Anderson

Mailing Address 717 N. 87th St.

City State Zip Code
Omaha NE 68114

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

Name of Employer Sharp Anderson Arena Curnes & Assoc
Occupation Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175130

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lanny D. Levin

Mailing Address 313 Laurel

City State Zip Code
Highland Park IL 60035-2619

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

Name of Employer Lanny D. Levin Agency, Inc.
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175144

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City State Zip Code
New York NY 10014-7200

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

Name of Employer Weiser Capital Management LLC
Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175148

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **134.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Summerlin

Mailing Address 4014 N. W. 15th Street

City State Zip Code
Gainesville FL 32605-1912

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

Name of Employer Occupation
Summerlin Financial Advisors, Inc. Certified Financial Planner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9175166

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald G. Hester

Mailing Address 261 New River Heights Rd.

City State Zip Code
Boone NC 28607

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

Name of Employer Occupation
Lincoln Financial Network AGENT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 233.75

Date of Receipt

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

Transaction ID: 9175190

Amount of Each Receipt this Period
46.75

C.

Full Name (Last, First, Middle Initial)

Mr. Gary A. Bramon

Mailing Address 269 San Felipe Way

City State Zip Code
Novato CA 94945-1687

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

Name of Employer Occupation
Alders Financial Solutions General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 9175200

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

138.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Marcus T. Henderson, Sr.

Mailing Address 109 Barrington Court East

City State Zip Code
Franklin TN 37067

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

Name of Employer Occupation
Henderson Financial Group, Inc. President & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9175204

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard Lee Harlow

Mailing Address 12250 Angel Wing Ct

City State Zip Code
Reston VA 20191-1102

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

Name of Employer Occupation
The Harlow Group, LLC Managing Partner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9175210

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lance B. Kolbet

Mailing Address 4632 Mountain Park Rd.

City State Zip Code
Pocatello ID 83202-1702

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

Name of Employer Occupation
University Financial Group President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 630.00

Date of Receipt

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

Transaction ID: 9175228

Amount of Each Receipt this Period

126.00

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Douglas B. Massey	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 3115 Southwest Blvd.	Transaction ID: 9175250
	City State Zip Code San Angelo TX 76904-5772	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Doug Massey Financial Services Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.50	

B.	Full Name (Last, First, Middle Initial) Mr. Matthew S. Tassej	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 5 Reggio Ave.	Transaction ID: 9175278
	City State Zip Code Old Orchard Beach ME 04064-2709	Amount of Each Receipt this Period 72.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Burwell & Burwell Occupation Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Mr. Martin Montefel	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 16932 SW 5th Way	Transaction ID: 9175286
	City State Zip Code Weston FL 33326-1564	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Marty Montefel Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	164.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Peter Fulchiron

Mailing Address 411 San Andreas Drive

City State Zip Code
Novato CA 94945-1237

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

Name of Employer Allstate Life Insurance Company
Occupation Agency Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

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

Transaction ID: 9175302

Amount of Each Receipt this Period

105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City State Zip Code
Muncy PA 17756-5789

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

Name of Employer Kent A. Bennett & Assoc., Inc.
Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 437.50

Date of Receipt

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

Transaction ID: 9175306

Amount of Each Receipt this Period

87.50

C.

Full Name (Last, First, Middle Initial)
Mr. Stephen D. Estler

Mailing Address 2177 NE 63 St.

City State Zip Code
Fort Lauderdale FL 33308-1330

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

Name of Employer Mass Mutual
Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: 9175326

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

242.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. William C. Anderson

Mailing Address 205 Whippoorwill Drive

City State Zip Code
Altamonte Spgs FL 32701-7827

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

Name of Employer Occupation
Rogers Benefit Group Field Sales Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175334

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City State Zip Code
Flint MI 48532

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

Name of Employer Occupation
Security 1st Benefits Corp. CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175344

Amount of Each Receipt this Period
105.00

C.

Full Name (Last, First, Middle Initial)
Mr. George B. Bryce

Mailing Address 2730 Ardon Ln

City State Zip Code
Casper WY 82609-3902

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

Name of Employer Occupation
The Insurance Agency General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175356

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **189.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Donald C. Jayne

Mailing Address 20402 Tulsa Street

City Chatsworth State CA Zip Code 91311-1723

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

Name of Employer Executive Financial Systems Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9175404
Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City Carmichael State CA Zip Code 95608

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

Name of Employer NAIFA - California Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9175455
Amount of Each Receipt this Period 42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael O. Brown

Mailing Address 6512 NE 113

City Edmond State OK Zip Code 73013-8351

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

Name of Employer MassMutual Financial Group Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9175459
Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 144.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. T. Leslie Littleton

Mailing Address 1025 E. Austin

City State Zip Code
Nacogdoches TX 75965-2964

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

Name of Employer Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175487

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Mr. John W. Bounds

Mailing Address 1434 South Lamar Blvd.

City State Zip Code
Oxford MS 38655-4738

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

Name of Employer Occupation
Bounds & Associates Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175491

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. Carl James Maus

Mailing Address 432 Fort Saratoga

City State Zip Code
Saint Charles MO 63303-1766

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

Name of Employer Occupation
Insurance and Investment Services Career Development Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175499

Amount of Each Receipt this Period
50.40

SUBTOTAL of Receipts This Page (optional) ► **152.40**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Robert M. Nelson

Mailing Address 14712 Shirley Street

City State Zip Code
Omaha NE 68144-2144

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

Name of Employer Occupation
Grace-Mayer Ins. Agency Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175503

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard L. Hill

Mailing Address 2611 Alvo Road

City State Zip Code
Seward NE 68434

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

Name of Employer Occupation
Unico Financial Services, Inc. General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175509

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City State Zip Code
Los Altos CA 94022-2354

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

Name of Employer Occupation
The Vita Companies Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175513

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **134.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Mark R. Warren

Mailing Address 3603 Grandview

City Plainview State TX Zip Code 79072-6625

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

Name of Employer Warren Insurance Services Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9175521
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Mr. David A. Middaugh

Mailing Address 3273 Evergreen Road

City Fargo State ND Zip Code 58102-1214

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

Name of Employer Middaugh & Associates, Inc. Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1449.60

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9175523
 Amount of Each Receipt this Period: 300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Karl Erik Hansen

Mailing Address 900 North Shoreline Boulevard

City Mountain View State CA Zip Code 94043-1933

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

Name of Employer The Vita Companies Occupation Brokerage Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9175531
 Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► **392.50**

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

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

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

FOR LINE NUMBER: PAGE 25 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John R. Dean

Mailing Address 1700 S.W. 15th Ave.

City State Zip Code
Willmar MN 56201

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

Name of Employer
Affiliated Financial Services Inc.

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: 9175541

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Brian R. Phares

Mailing Address 1420 Hackberry Road

City State Zip Code
North Platte NE 69101-6841

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

Name of Employer
Phares Financial Services

Occupation
Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.50

Date of Receipt

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

Transaction ID: 9175545

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. William N. Haraway

Mailing Address 113 Fairview Ave

City State Zip Code
Frederick MD 21701-4017

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

Name of Employer
Haraway Financial Services

Occupation
Financial Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

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

Transaction ID: 9175553

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **167.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City State Zip Code
Tupelo MS 38801

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
United American Insurance Co. Branch Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9175605

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Hollis O. Inglett, Jr.

Mailing Address 31 Cone Rd

City State Zip Code
Ormond Beach FL 32174-7903

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Hayward Brown Inc. Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9175643

Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Laster

Mailing Address 1713 Elmhurst Ave

City State Zip Code
Nichols Hills OK 73120

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Rogers Benefit Group Regional Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9175645

Amount of Each Receipt this Period 50.40

SUBTOTAL of Receipts This Page (optional) 142.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Byron Hyatt Erstad, Jr.
Mailing Address 2510 S Nantucket Way
City State Zip Code
Boise ID 83706-5095
FEC ID number of contributing federal political committee. **C**
Name of Employer Erstad & Company Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00
Date of Receipt 05 / 10 / 2010
Transaction ID: 9175649
Amount of Each Receipt this Period 50.40

B. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Clark
Mailing Address 1603 22nd St Ste 202
City State Zip Code
West Des Moines IA 50266-1410
FEC ID number of contributing federal political committee. **C**
Name of Employer Compensation Designs Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 05 / 10 / 2010
Transaction ID: 9175657
Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank R. Nolimal
Mailing Address 2017 Grafton Ave
City State Zip Code
Henderson NV 89014
FEC ID number of contributing federal political committee. **C**
Name of Employer Assurance Ltd Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 05 / 10 / 2010
Transaction ID: 9175761
Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 170.40
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. William T. Whitmore, Jr.

Mailing Address 3495 Winding Trail Circle

City State Zip Code
Virginia Beach VA 23456

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

Name of Employer One America Occupation Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

Transaction ID: 9175765

Amount of Each Receipt this Period
65.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kenneth E. Knox

Mailing Address Unit 9, 10 East St

City State Zip Code
Providence RI 02906-3069

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

Name of Employer Penn Mutual Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

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

Transaction ID: 9175843

Amount of Each Receipt this Period
50.40

C.

Full Name (Last, First, Middle Initial)
Mr. Lawrence J. Stack

Mailing Address 28630 Glenbrook Dr

City State Zip Code
Southfield MI 48034-5543

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

Name of Employer Michigan Financial Occupation Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

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

Transaction ID: 9175847

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► **220.40**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. April L. Howard

Mailing Address 3386 Williamsburg

City State Zip Code
Boise ID 83706-5320

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

Name of Employer
Howard Insurance Agency

Occupation
Agent/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175875

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Mr. David E. Smithkey

Mailing Address 9451 Heddy Drive

City State Zip Code
Flushing MI 48433-1051

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

Name of Employer
Security First Benefits Corp.

Occupation
President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175891

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Randall D. Kaufmann

Mailing Address 356 Equus Drive

City State Zip Code
Camp Hill PA 17011-8357

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

Name of Employer
Prudential Financial

Occupation
Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175899

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► **155.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Debbie K. Paul

Mailing Address 4001 MacArthur Blvd Suite 300

City State Zip Code
Newport Beach CA 92660-2510

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

Name of Employer Occupation
Securian Financial Network Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.50

Date of Receipt

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

Transaction ID: 9175907

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)
Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City State Zip Code
Canyon Lake CA 92587-7831

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

Name of Employer Occupation
Torimax Financial Group, Inc. President & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1208.50

Date of Receipt

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

Transaction ID: 9175921

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Darren Scott Mason

Mailing Address 178 Shorecliff Rd

City State Zip Code
Corona del Mar CA 92625-2648

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

Name of Employer Occupation
Advanced Benefit Systems General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.30

Date of Receipt

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

Transaction ID: 9175925

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)

334.16

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 120
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. John C. Johns

Mailing Address 5141 Lilly Rd.

City State Zip Code
Hazlehurst MS 39083

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

Name of Employer Southern Farm Bureau Life Insurance
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175969

Amount of Each Receipt this Period
52.50

B.

Full Name (Last, First, Middle Initial)
Mr. Carl G. Boutwell, Jr.

Mailing Address 109 Fern Dr

City State Zip Code
Brandon MS 39042

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

Name of Employer Carl Boutwell Agency
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9175983

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Daniel L. Rust

Mailing Address 114 W. Arnold

City State Zip Code
Bozeman MT 59715-6129

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

Name of Employer State Farm Insurance Companies
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176037

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional) ► **192.50**

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

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

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

FOR LINE NUMBER: PAGE 32 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Steven R. Markham

Mailing Address 4 Alae St.

City State Zip Code
Hilo HI 96720

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

Name of Employer Markham Insurance Services Occupation OWNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.50

Date of Receipt

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

Transaction ID: 9176069

Amount of Each Receipt this Period
42.50

B. Full Name (Last, First, Middle Initial)
Mr. Mitchell W. Ostrove

Mailing Address 4 New King Street

City State Zip Code
White Plains NY 10604-1202

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

Name of Employer The Ostrove Group Inc. Occupation General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9176085

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. John J. Bradley

Mailing Address 148 Grove Street

City State Zip Code
Westwood MA 02090

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

Name of Employer Bradley Insurance Agency, Inc. Occupation President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 208.30

Date of Receipt

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

Transaction ID: 9176089

Amount of Each Receipt this Period
41.66

SUBTOTAL of Receipts This Page (optional) ► **126.16**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. R. Jan Pinney

Mailing Address 5152 Ellington Court

City State Zip Code
Granite Bay CA 95746-7188

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

Name of Employer Pinney Insurance Center, Inc. Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176093

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Mr. David M. Koll

Mailing Address 1612 S. 152nd Street

City State Zip Code
Omaha NE 68144-5121

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

Name of Employer Mutual of Omaha Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176101

Amount of Each Receipt this Period
105.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Ables

Mailing Address PO Box 2205

City State Zip Code
Avila Beach CA 93424-2205

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

Name of Employer Michael Ables Insurance Services Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176133

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **355.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Richard D. Vonderlage

Mailing Address 15202 Sprague St

City State Zip Code
Omaha NE 68116

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

Name of Employer Occupation
Heritage Financial Svcs. Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176141

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. H. Larry Fortenberry

Mailing Address 123 Northshore Pt

City State Zip Code
Madison MS 39110-7272

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

Name of Employer Occupation
Executive Planning Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176171

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Mr. David S. Dickenson, II

Mailing Address 7535 Brigham Road

City State Zip Code
Gates Mills OH 44040-9782

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

Name of Employer Occupation
Dickenson & Associates General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176223

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **159.00**

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

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

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

FOR LINE NUMBER: PAGE 35 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Troy J. Shreve

Mailing Address 7100 S 45th Street

City Lincoln State NE Zip Code 68516-3016

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

Name of Employer Benefit Management Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9176239
 Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Mr. Douglas E. Aycock

Mailing Address 5113 Southwest Pkwy # 200

City Austin State TX Zip Code 78735-8915

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

Name of Employer Aycock Financial Group Occupation Employee Benefit Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt 05 / 10 / 2010
Transaction ID: 9176251
 Amount of Each Receipt this Period 42.50

C. Full Name (Last, First, Middle Initial)
Mr. M. Jay Einstein

Mailing Address 59 Margarete Dr.

City Pittsgrove State NJ Zip Code 08318-3015

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

Name of Employer South Jersey General Office Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9176259
 Amount of Each Receipt this Period 72.00

SUBTOTAL of Receipts This Page (optional) ► 156.50

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas F. Flournoy, Jr.

Mailing Address 5300 Zebulon Rd

City State Zip Code
Macon GA 31210-2199

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

Name of Employer Occupation
New York Life General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176273

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Dennis A. Brumbaugh

Mailing Address 17 Conley Lane

City State Zip Code
Elma WA 98541

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

Name of Employer Occupation
Brumbaugh Insurance Services AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176333

Amount of Each Receipt this Period
42.50

C.

Full Name (Last, First, Middle Initial)
Mr. Gordon T. Colburn

Mailing Address 126 Crystal Springs Road

City State Zip Code
San Dimas CA 91773-1116

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

Name of Employer Occupation
Colburn Ins. Services, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176339

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **127.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 120
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jeffery J. Johnston

Mailing Address 1425 Lakeside Ct

City State Zip Code
Yakima WA 98902-7354

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

Name of Employer Occupation
New York Life Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176359

Amount of Each Receipt this Period
42.50

B. Full Name (Last, First, Middle Initial)
Mr. Aldous Kawaiiani Paalani

Mailing Address 51-316 A Kamehameha Hwy.

City State Zip Code
Kaaawa HI 96730

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

Name of Employer Occupation
Equity Insurance Services, Inc Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176367

Amount of Each Receipt this Period
62.50

C. Full Name (Last, First, Middle Initial)
Mr. Ken Simons

Mailing Address 808 Thoroughbred Lane

City State Zip Code
Artesia NM 88210-9373

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

Name of Employer Occupation
New York Life Insurance General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176379

Amount of Each Receipt this Period
50.10

SUBTOTAL of Receipts This Page (optional) ► **155.10**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Robert C. Rockett, Jr.

Mailing Address 1221 Willapa First St

City Raymond State WA Zip Code 98577

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

Name of Employer R & S Financial Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9176383

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Angelo Assad Haddad

Mailing Address 354 Garnsey Ave

City Bakersfield State CA Zip Code 93309-1849

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

Name of Employer New York Life Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9176395

Amount of Each Receipt this Period: 42.50

C. Full Name (Last, First, Middle Initial)
Mr. Anthony D. Miller

Mailing Address 4502 Hi-Line Dr

City Billings State MT Zip Code 59106

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

Name of Employer Retirement Solutions Occupation Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9176409

Amount of Each Receipt this Period: 50.40

SUBTOTAL of Receipts This Page (optional) ► **142.90**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 120
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Robert M. Roach

Mailing Address 1287 Harrison Pond Drive

City Columbus State OH Zip Code 43215

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

Name of Employer NMFN - Kemelgor Fin. Group Occupation Wealth Management Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9176434

Amount of Each Receipt this Period 125.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard A. Koob

Mailing Address 301 Frederick Street

City Waukesha State WI Zip Code 53186-8116

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

Name of Employer The Holter Financial Group Occupation Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9176436

Amount of Each Receipt this Period 50.40

C.

Full Name (Last, First, Middle Initial)
Mr. Mitchell B. Glover

Mailing Address 6700 Old Darby Trail

City Ada State MI Zip Code 49301-8360

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

Name of Employer Northwestern Mutual Financial Network Occupation Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9176484

Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 217.40

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Laura P. DeGolier

Mailing Address 114 S. Main Street
PMB 301

City State Zip Code
Fond Du Lac WI 54935-4229

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

Name of Employer DeGolier Insurance Services, LLC Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.20

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

Transaction ID: 9176506

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell D. Jenkins

Mailing Address 1988 Burlingame Rd.

City State Zip Code
Emporia KS 66801

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

Name of Employer Northwestern Mutual Fin. Network Occupation Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

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

Transaction ID: 9176508

Amount of Each Receipt this Period
50.40

C. Full Name (Last, First, Middle Initial)
Mr. Charles E. Jackson, Jr.

Mailing Address 53 Jordan Lane

City State Zip Code
Mobile AL 36608-2624

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

Name of Employer McNeil, Jackson, Ahrens Financial Grou Occupation Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

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

Transaction ID: 9176512

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **137.90**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 120
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. James A. Buchan

Mailing Address 5716 W Orlando Cir

City State Zip Code
Broken Arrow OK 74011-1149

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

Name of Employer Occupation
Northwestern Mutual AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176514

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Mr. David B. Bianchi

Mailing Address 1125 Beldon Way

City State Zip Code
Reno NV 89503-3164

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176532

Amount of Each Receipt this Period
60.00

C.

Full Name (Last, First, Middle Initial)
Mr. Terry M. Kaltenbach

Mailing Address 1358 Ahlrich Ave

City State Zip Code
Encintas CA 92024-4029

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

Name of Employer Occupation
Saybrus Partners Wealth Management Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176554

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **270.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Shannon J. Enders
Mailing Address 5677 Westwood Drive
City Muskegon State MI Zip Code 49441
FEC ID number of contributing federal political committee. **C**
Name of Employer Lakeshore Employee Benefits Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00
Date of Receipt 05 / 10 / 2010
Transaction ID: 9176574
Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Mr. David T. Koppa
Mailing Address 1105 Via Bolzano
City Santa Barbara State CA Zip Code 93111-1053
FEC ID number of contributing federal political committee. **C**
Name of Employer Cornerstone Insurance Services Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 212.50
Date of Receipt 05 / 10 / 2010
Transaction ID: 9176578
Amount of Each Receipt this Period 42.50

C. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Fowler
Mailing Address 13243 SE 51st Pl
City Bellevue State WA Zip Code 98006
FEC ID number of contributing federal political committee. **C**
Name of Employer Fowler Financial Services, Inc. Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 537.50
Date of Receipt 05 / 10 / 2010
Transaction ID: 9176586
Amount of Each Receipt this Period 107.50

SUBTOTAL of Receipts This Page (optional) ► 192.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 43 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Walter J. Scott

Mailing Address 1022 Washington Ave

City State Zip Code
Oshkosh WI 54901-5354

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

Name of Employer
W. F. Coe & Associates, LLC

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176596

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. Larry J. Winkelhake

Mailing Address 18600 Longview Ct

City State Zip Code
Brookfield WI 53045-2513

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

Name of Employer
Principal Financial Group

Occupation
General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176672

Amount of Each Receipt this Period
90.00

C. Full Name (Last, First, Middle Initial)
Mr. Randall H. Jensen

Mailing Address 124 W 46th St., #201

City State Zip Code
Kearney NE 68847-8348

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

Name of Employer
The Principal Financial Group

Occupation
Sr. Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176684

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **182.90**

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

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

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

FOR LINE NUMBER: PAGE 44 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Leonard Martin

Mailing Address 98 Tennyson Rd

City State Zip Code
Warwick RI 02888-1818

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

Name of Employer Leonard Martin & Associates Inc Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

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

Transaction ID: 9176730

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. Gary H. Pendleton

Mailing Address 2607 Oberlin Rd Ste 100

City State Zip Code
Raleigh NC 27608-1319

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

Name of Employer Pendleton Financial Consulting Inc. Occupation President/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.15

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

Transaction ID: 9176750

Amount of Each Receipt this Period
45.83

C. Full Name (Last, First, Middle Initial)
Mr. Joseph J. Maltese

Mailing Address 4176 Arikakee Court

City State Zip Code
Jacksonville FL 32223

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

Name of Employer John Hancock Della Porta Agency Occupation Investment Advisor Rep.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

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

Transaction ID: 9176766

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **138.23**

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

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

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

FOR LINE NUMBER: PAGE 45 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Keith M. Gillies

Mailing Address 109 W. Lakeview Dr.

City State Zip Code
La Place LA 70068-2427

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

Name of Employer Occupation
River Parishes Advisors Managing Director
Group, LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1040.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176808

Amount of Each Receipt this Period
208.00

B. Full Name (Last, First, Middle Initial)
Mr. Douglas Austin

Mailing Address Suite 9 Kite Hill Rd

City State Zip Code
Santa Cruz CA 95060-1418

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

Name of Employer Occupation
Austin Ins & Financial Se- AGENT
rv

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176824

Amount of Each Receipt this Period
42.50

C. Full Name (Last, First, Middle Initial)
Ms. Brenda D. Doty

Mailing Address 107 Topaz

City State Zip Code
Horseshoe Bend AR 72512

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

Name of Employer Occupation
Doty Group Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176896

Amount of Each Receipt this Period
51.00

SUBTOTAL of Receipts This Page (optional) ► 301.50

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

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

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

FOR LINE NUMBER: PAGE 46 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Juli Y. McNeely

Mailing Address S764 Hanson Road

City State Zip Code
Spencer WI 54479

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

Name of Employer
McNeely Financial Services Inc

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176992

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard L. Miller

Mailing Address 1214 Karr Ave.

City State Zip Code
Yakima WA 98902-5026

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

Name of Employer
Northwestern Mutual Financial Network

Occupation
Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9176998

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Glenn P. Deal, Jr.

Mailing Address 58 Golf Course Ln.

City State Zip Code
Taylorsville NC 28681-7847

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

Name of Employer
Thrivent Financial for Lutherans

Occupation
Financial Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.25

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9177098

Amount of Each Receipt this Period
74.25

SUBTOTAL of Receipts This Page (optional) ► **184.25**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Sergio J. Acuna		Date of Receipt MM / DD / YYYY 05 / 10 / 2010		
	Mailing Address 1856 Bob Murphy Drive		Transaction ID: 9177100		
	City El Paso	State TX	Zip Code 79936	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Lincoln Financial Network	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

B.	Full Name (Last, First, Middle Initial) Mr. F. Nicholas Kelley		Date of Receipt MM / DD / YYYY 05 / 10 / 2010		
	Mailing Address 1323 S. 174 St.		Transaction ID: 9177158		
	City Omaha	State NE	Zip Code 68130	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Kelley Financial Services, Inc	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

C.	Full Name (Last, First, Middle Initial) Ms. Queenie M. Chee		Date of Receipt MM / DD / YYYY 05 / 10 / 2010		
	Mailing Address 833 Waika Place		Transaction ID: 9177162		
	City Honolulu	State HI	Zip Code 96825-1061	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer The Principal Financial Group	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

SUBTOTAL of Receipts This Page (optional)	▶	126.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 48 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John Everett

Mailing Address 531 Daniel

City State Zip Code
Santa Maria CA 93454-7898

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

Name of Employer Allstate Life Insurance Company
Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

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

Transaction ID: 9177260

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Mr. Jonathan David Haymes

Mailing Address 1230 s. hickory lane

City State Zip Code
Nixa MO 65714

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

Name of Employer Haymes Insurance Agency
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.80

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

Transaction ID: 9177346

Amount of Each Receipt this Period
25.20

C. Full Name (Last, First, Middle Initial)
Mr. James R. Christensen, Jr.

Mailing Address 440 Regency Pkwy Dr #210A

City State Zip Code
Omaha NE 68114

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

Name of Employer INSOURCE, Inc.
Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

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

Transaction ID: 9177354

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► **172.20**

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

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

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

FOR LINE NUMBER: PAGE 49 / 120
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Mark A. Chandik

Mailing Address 42 Ritz Cove Drive

City State Zip Code
Dana Point CA 92629-4228

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

Name of Employer Occupation
FDP Wealth Management Agent/Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9177508

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel L. Lawrence

Mailing Address 5553 Peters Drive

City State Zip Code
West Bend WI 53095-8301

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

Name of Employer Occupation
Modern Woodmen of America Agency Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: 9177534

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)
Mr. Casey C. Knake

Mailing Address 2902 Mach I Dr.

City State Zip Code
Norfolk NE 68701-3238

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

Name of Employer Occupation
Heritage Financial Services, LLC Investment Specialist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9177562

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

144.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Robert J. Hollander	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 904 Rockhurst Dr.	Transaction ID: 9177568
	City State Zip Code Lincoln NE 68510-4114	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Midlands Financial Benefits Occupation: AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.50	

B.	Full Name (Last, First, Middle Initial) Mr. Timothy J. Brungardt	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 314 N. 5th.	Transaction ID: 9177600
	City State Zip Code Norfolk NE 68701-4093	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Heritage Financial Services Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Mr. Albert T. Hurst, Jr.	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 1901 S. Broadway St.	Transaction ID: 9177638
	City State Zip Code Little Rock AR 72206-1351	Amount of Each Receipt this Period 50.40
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Modern Woodmen of America Occupation: Agency Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	▶	134.90
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory Lynn Grimes

Mailing Address 2310 Live Oak Ln

City State Zip Code
Columbia MO 65202-1789

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

Name of Employer Occupation
APEX Financial, LLC Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: 9177718

Amount of Each Receipt this Period
45.00

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas C. Besselman

Mailing Address 6421 Perkins Rd #2B

City State Zip Code
Baton Rouge LA 70808-4125

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

Name of Employer Occupation
The Besselman & Little Agency President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: 9177817

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City State Zip Code
West Monroe LA 71291

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

Name of Employer Occupation
MetLife Financial Services MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: 9177827

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

145.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Dilip A. Jhaveri

Mailing Address 6901 Rockledge Dr. #800

City State Zip Code
Bethesda MD 20817-1817

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

Name of Employer Occupation
New York Life AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -807.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9177875

Amount of Each Receipt this Period
4.25

B. Full Name (Last, First, Middle Initial)
Mr. Samuel H. Hazleton, IV

Mailing Address 4220 Lakeshore Drive

City State Zip Code
Diamond Point NY 12824

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9177991

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. Todd G. Grantham

Mailing Address 203 Brandermill Drive

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
Northwestern Mutual Financial Network Financial Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 577.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9178035

Amount of Each Receipt this Period
115.50

SUBTOTAL of Receipts This Page (optional) ► **161.75**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Jeffery J. King

Mailing Address 36135 Alligator Bayou Rd

City State Zip Code
Prairieville LA 70769-3052

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

Name of Employer Occupation
Northwestern Mutual AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

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

Transaction ID: 9178053

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. James R. Goodrich

Mailing Address 1860 Beech

City State Zip Code
Mt. Pleasant MI 48858-1280

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

Name of Employer Occupation
Northwestern Mutual Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

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

Transaction ID: 9178061

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lance P. Franczyk

Mailing Address 3009 Alyssum Ct.

City State Zip Code
Edmond OK 73034

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

Name of Employer Occupation
Oklahoma City Group Managing Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

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

Transaction ID: 9178077

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **185.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Chandik

Mailing Address 1332 Shorebird Ln

City State Zip Code
Carlsbad CA 92011-4884

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

Name of Employer Occupation
Lincoln Financial Network Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 237.50

Date of Receipt

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

Transaction ID: 9178085

Amount of Each Receipt this Period

47.50

B.

Full Name (Last, First, Middle Initial)

Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City State Zip Code
Orem UT 84097

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

Name of Employer Occupation
S. B. HEINZ & ASSOCIATES, INC. Financial Rep

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: 9178105

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. O. Taylor Davis

Mailing Address 104 Hanover Square

City State Zip Code
Lafayette LA 70508

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

Name of Employer Occupation
The Louisiana Group Financial Representative

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.50

Date of Receipt

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

Transaction ID: 9178119

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Elwyn D. Guernsey

Mailing Address 618 Lakewood Road

City State Zip Code
Pensacola FL 32507-2434

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

Name of Employer Occupation
Guernsey & Associates Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9178135

Amount of Each Receipt this Period
42.50

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas P. Cunningham

Mailing Address 4292 Rangeview Drive

City State Zip Code
Billings MT 59106-4738

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

Name of Employer Occupation
Farm Bureau Financial Services Agency Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9178147

Amount of Each Receipt this Period
50.40

C.

Full Name (Last, First, Middle Initial)
Mr. C. Robert Brown, Sr.

Mailing Address 8675 WestCott

City State Zip Code
Germantown TN 38138-7738

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

Name of Employer Occupation
UCL Financial Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9178215

Amount of Each Receipt this Period
62.50

SUBTOTAL of Receipts This Page (optional) ► **155.40**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Sharon L. Sparling
Mailing Address P.O. Box 1914
City State Zip Code
Mount Vernon WA 98273-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Occupation PRODUCER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 10 / 2010
Transaction ID: 9178271
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Alan R. Zalewski
Mailing Address 6908 North 27th Street
City State Zip Code
Tacoma WA 98407-1002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Burnley Wilson Associates President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 10 / 2010
Transaction ID: 9178345
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. David L. Sparks
Mailing Address PO Box 3509
City State Zip Code
Hickory NC 28603
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Capital Concepts Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 577.50
Date of Receipt 05 / 10 / 2010
Transaction ID: 9178428
Amount of Each Receipt this Period 115.50

SUBTOTAL of Receipts This Page (optional) ► 215.50
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 120
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr. James John Silbernagel		Date of Receipt MM / DD / YYYY 05 / 10 / 2010
Mailing Address W 2329 Capital Drive		Transaction ID: 9178450
City Campbellsport	State WI	Zip Code 53010-3010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Silbernagel & Jasen Financial	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Mr. John Palladino, Jr.		Date of Receipt MM / DD / YYYY 05 / 10 / 2010
Mailing Address 15060 Becky Lane		Transaction ID: 9178482
City Monte Sereno	State CA	Zip Code 95030-2106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Link-Allen Benefit Group	Occupation V.P	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C.

Full Name (Last, First, Middle Initial) Mr. Robert A. Styrkowicz		Date of Receipt MM / DD / YYYY 05 / 10 / 2010
Mailing Address 361 Pines Blvd.		Transaction ID: 9178538
City Lake Villa	State IL	Zip Code 60046-6600
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Allstate Insurance	Occupation Exclusive Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 372.50	

SUBTOTAL of Receipts This Page (optional)	▶	177.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City State Zip Code
Oil City LA 71061

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

Name of Employer Occupation
Burke & Burke Insurance Agency Owner
Mrktg, Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

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

Transaction ID: 9178616

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ian C. Wilkinson

Mailing Address P.O. Box 7096

City State Zip Code
Macon GA 31209-7096

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

Name of Employer Occupation
Wilkinson & Associates Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 292.00

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

Transaction ID: 9178646

Amount of Each Receipt this Period
62.50

C.

Full Name (Last, First, Middle Initial)
Mr. Michael G. Murphy

Mailing Address 2041 S 88 St

City State Zip Code
Omaha NE 68124-2111

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

Name of Employer Occupation
Grace/Mayer Insurance Age- Registered Representative
ncy Inc

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

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

Transaction ID: 9178648

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► 209.50

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

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

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

FOR LINE NUMBER: PAGE 59 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James E. Mitchell

Mailing Address 3990 Jones Ln

City Bellingham State WA Zip Code 98225-8544

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

Name of Employer Mitchell Financial Services Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.50

Date of Receipt 05 / 10 / 2010
Transaction ID: 9178732
Amount of Each Receipt this Period 42.50

B. Full Name (Last, First, Middle Initial)
Mr. Terry K. Headley

Mailing Address 20704 Meadow Ridge Dr

City Springfield State NE Zip Code 68059-7086

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

Name of Employer Headley Financial Group Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1166.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9178746
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Ms. Therese M. Fairbanks

Mailing Address P. O. Box 7036

City Billings State MT Zip Code 59103-7036

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

Name of Employer Payne Financial Group Occupation Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt 05 / 10 / 2010
Transaction ID: 9178756
Amount of Each Receipt this Period 52.50

SUBTOTAL of Receipts This Page (optional) ► 345.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Larry R. Lee

Mailing Address 25106 Cineria

City State Zip Code
Lake Forest CA 92630-3307

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

Name of Employer: Financial Diligence Partners
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9178768
 Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard D. Kimmel

Mailing Address 6525 Bellaire Drive S

City State Zip Code
Ft Worth TX 76132-1138

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

Name of Employer: Principal Financial Group
Occupation: Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9178806
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. John B. Kearns

Mailing Address 1802 First Ave

City State Zip Code
Scottsbluff NE 69361-2403

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

Name of Employer: Jolliffe Capital, Inc.
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.50

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9178854
 Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► **134.50**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Harry E. Sechman		Date of Receipt MM / DD / YYYY 05 / 10 / 2010		
	Mailing Address 13 Beechwood Dr		Transaction ID: 9178900		
	City Rutland	State MA	Zip Code 01543-1751	Amount of Each Receipt this Period 42.50	
	FEC ID number of contributing federal political committee. C				
Name of Employer H.E. Sechman Retirement Planning		Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.50			

B.	Full Name (Last, First, Middle Initial) Mr. Gary M. Owens		Date of Receipt MM / DD / YYYY 05 / 10 / 2010		
	Mailing Address PO Box 835		Transaction ID: 9178918		
	City Sultan	State WA	Zip Code 98294	Amount of Each Receipt this Period 42.50	
	FEC ID number of contributing federal political committee. C				
Name of Employer Gary M Owens Insurance Agency Inc		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.50			

C.	Full Name (Last, First, Middle Initial) Mr. John W. Wheeler, Jr.		Date of Receipt MM / DD / YYYY 05 / 10 / 2010		
	Mailing Address 1075 Aster Ln.		Transaction ID: 9178958		
	City West Chicago	State IL	Zip Code 60185-1750	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

SUBTOTAL of Receipts This Page (optional)	127.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. William A. Hume		Date of Receipt	
	Mailing Address 1075 Woodfield Lane		M M / D D / Y Y Y Y 05 / 10 / 2010	
	City	State	Zip Code	Transaction ID: 9179024
	Libertyville	IL	60048	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		47.50	
Name of Employer State Farm Insurance Companies		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		237.50		

B.	Full Name (Last, First, Middle Initial) Mr. Roger L. Owens		Date of Receipt	
	Mailing Address 104 Landing Lane		M M / D D / Y Y Y Y 05 / 10 / 2010	
	City	State	Zip Code	Transaction ID: 9179138
	Elkton	MD	21921-5204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		62.50	
Name of Employer Rymark Financial Services		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		312.50		

C.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Wells		Date of Receipt	
	Mailing Address 18830 Los Hermanos Ranch Rd		M M / D D / Y Y Y Y 05 / 10 / 2010	
	City	State	Zip Code	Transaction ID: 9179144
	Valley Center	CA	92082-6808	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Daniel Wells Insurance & Financial Ser		Occupation Owner/Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		417.50		

SUBTOTAL of Receipts This Page (optional)	▶	160.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Steven M. Stratton

Mailing Address 17131 Parkview Dr

City State Zip Code
Morgan Hill CA 95037-6606

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

Name of Employer: Financial & Insurance Services
Occupation: PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179198
Amount of Each Receipt this Period: 105.00

B.

Full Name (Last, First, Middle Initial)
Ms. Cylinda A. Clark

Mailing Address 4002 San Mateo

City State Zip Code
Plano TX 75093-6618

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

Name of Employer:
Occupation: Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.50

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179256
Amount of Each Receipt this Period: 44.50

C.

Full Name (Last, First, Middle Initial)
Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City State Zip Code
Washington VA 20001-5006

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

Name of Employer: NAIFA
Occupation: Sr VP Law & Govt Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.25

Date of Receipt: 05 / 07 / 2010
Transaction ID: 9179328
Amount of Each Receipt this Period: 31.25

SUBTOTAL of Receipts This Page (optional) ► **180.75**

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

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

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

FOR LINE NUMBER: PAGE 64 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Ronald L. Gay

Mailing Address 1106 Deacon Drive

City State Zip Code
College Station TX 77845-6401

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

Name of Employer Occupation
Brown & Company Insurance Insurance Agent
Services

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

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

Transaction ID: 9179350

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City State Zip Code
Kennewick WA 99336-1280

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

Name of Employer Occupation
Kansas City Life Insurance Sales Manager
Company

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1040.00

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

Transaction ID: 9179356

Amount of Each Receipt this Period
208.00

C. Full Name (Last, First, Middle Initial)
Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City State Zip Code
Hendersonville TN 37075-8587

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

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

Transaction ID: 9179378

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► 292.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Dennis P. Sunderman

Mailing Address 2325 Jeans Ct

City State Zip Code
Signal Hill CA 90755-4047

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

Name of Employer: Eldercare Insurance Services
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179547
 Amount of Each Receipt this Period: 62.50

B. Full Name (Last, First, Middle Initial)
Mr. Benson B. Terrell, Jr.

Mailing Address 9261 Lanier Rd

City State Zip Code
Lake Charles LA 70607-0352

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

Name of Employer: The Firm of Louisiana
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179593
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Clifford B. Sutter

Mailing Address 114 Holly Dr.

City State Zip Code
Metairie LA 70005

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

Name of Employer: Northwestern Mutual
Occupation: Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179615
 Amount of Each Receipt this Period: 42.00

SUBTOTAL of Receipts This Page (optional) ► **154.50**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 / 120
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr. Marlin D. Wells		Date of Receipt
Mailing Address 2201 N. Washington		<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 0 / 2 0 1 0
City State Zip Code Roswell NM 88201-3377		Transaction ID: 9179629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer AXA Advisors, LLC	Occupation Financial Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.

Full Name (Last, First, Middle Initial) Mr. Joseph A. Sztapka		Date of Receipt
Mailing Address 3705 S. Judy Ave		<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 0 / 2 0 1 0
City State Zip Code Sioux Falls SD 57103-7248		Transaction ID: 9179657
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Modern Woodmen of America	Occupation Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.

Full Name (Last, First, Middle Initial) Mr. Robert E. Ross		Date of Receipt
Mailing Address 3918 S. Lisbon Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 0 / 2 0 1 0
City State Zip Code Aurora CO 80013-6032		Transaction ID: 9179773
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Ross South Metro Agency, Inc.	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	162.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 67 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James A. Shalek

Mailing Address 1706 Candleberry Lane

City State Zip Code
Yorkville IL 60560-5810

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

Name of Employer Principal Financial Group Occupation Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt

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

Transaction ID: 9179775

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City State Zip Code
Sarasota FL 34241-9449

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

Name of Employer Rogers Benefit Group Occupation Regional Mgr.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt

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

Transaction ID: 9179789

Amount of Each Receipt this Period
105.00

C. Full Name (Last, First, Middle Initial)
Mr. Lester E. Westgard

Mailing Address 2714 26th Ave SW

City State Zip Code
Fargo ND 58103-5006

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

Name of Employer The Principal Financial Group Occupation Special Marketing Developer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: 9179805

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **240.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Brian E. O'Brien

Mailing Address 1651 Wolf Run Dr.

City Richfield State WI Zip Code 53076-9686

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

Name of Employer The Principal Financial Group Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179835
 Amount of Each Receipt this Period: 60.00

B. Full Name (Last, First, Middle Initial)
Mr. David L. Belk

Mailing Address 2 Bay Tree Court

City Greensboro State NC Zip Code 27455

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

Name of Employer Belk Financial Group Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179971
 Amount of Each Receipt this Period: 55.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City Las Vegas State NV Zip Code 89130

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

Name of Employer Clearline Financial Group Occupation Field Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 05 / 10 / 2010
Transaction ID: 9179977
 Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ► 265.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Brenda S. Speer

Mailing Address 126 Sunset Dr

City Pulaski State TN Zip Code 38478-3631

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

Name of Employer Professional Benefit Solutions, LLC Occupation PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9179993

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Christopher Luke Simons

Mailing Address 713 Carper Dr

City Artesia State NM Zip Code 88210-2344

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

Name of Employer Simons and Associates Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9180035

Amount of Each Receipt this Period 50.40

C. Full Name (Last, First, Middle Initial)
Mr. Joseph L Morton, III

Mailing Address 5487 N Bach

City Meridian State ID Zip Code 83642

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

Name of Employer Intermountain Legal Group Occupation Attorney At Law

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9180037

Amount of Each Receipt this Period 126.00

SUBTOTAL of Receipts This Page (optional) ► 201.40

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

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

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

FOR LINE NUMBER: PAGE 70 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Dr. Michael W. Grossi

Mailing Address 119 Garfield Street

City State Zip Code
North Providence RI 02904

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

Name of Employer Occupation
One America Financial Partners/ TEAM F General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 252.00

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

Transaction ID: 9180059

Amount of Each Receipt this Period
50.40

B. Full Name (Last, First, Middle Initial)
Mr. Michael W. Struebing

Mailing Address 16112 Parker Street

City State Zip Code
Omaha NE 68118-2429

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

Name of Employer Occupation
Heritage Financial Services, LLC Representative

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

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

Transaction ID: 9180145

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. David R. Tuzson

Mailing Address 427 W 33rd #2

City State Zip Code
Scottsbluff NE 69361

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

Name of Employer Occupation
Ohio National Life General Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.50

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

Transaction ID: 9180159

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► 142.90

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 120
(check only one)

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

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

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Edward F. Randolph

Mailing Address 1515 Mill Bay Road
Suite A

City Kodiak State AK Zip Code 99615-6233

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

Name of Employer Edward F Randolph Ins. Agency Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9180196

Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Earl A. Thompson

Mailing Address 21014 Pricewood Manor Ct.

City Cypress State TX Zip Code 77433

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

Name of Employer State Farm Insurance Companies Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9180210

Amount of Each Receipt this Period 52.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard R. Rios

Mailing Address 8720 El Chapul Way

City Fair Oaks State CA Zip Code 95628-5454

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

Name of Employer Brecek & Young Advisors Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2010

Transaction ID: 9180258

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 144.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Cliff F. Wilson	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 1458 W. Bahia Court	Transaction ID: 9180317
	City State Zip Code Gilbert AZ 85233-5600	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Southeast Arizona Ins. Services, LTD	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

B.	Full Name (Last, First, Middle Initial) Mr. Terry R. Thayer	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 353 Prospector Trail	Transaction ID: 9180325
	City State Zip Code Bozeman MT 59718-7974	Amount of Each Receipt this Period 50.40
	FEC ID number of contributing federal political committee. C	
Name of Employer Thayer Agency	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.60	

C.	Full Name (Last, First, Middle Initial) Mr. Michael J. Edens	Date of Receipt MM / DD / YYYY 05 / 10 / 2010
	Mailing Address 1012 Endicott	Transaction ID: 9180359
	City State Zip Code Chattanooga TN 37405	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
Name of Employer John Hancock Financial Services	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	218.40
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 120
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Ronald J. Adams

Mailing Address 3819 Country Haven Ct

City State Zip Code
Sacramento CA 95821-2800

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

Name of Employer Occupation
Ronald Adams Fin. Planning Group Financial & Estate Planner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9180403

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Smith

Mailing Address P O Box 2295

City State Zip Code
Gillette WY 82717-2295

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

Name of Employer Occupation
Mountain West Farm Bureau Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9180656

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. George W. Williams, Jr.

Mailing Address 4109 Woodway Dr

City State Zip Code
Monroe LA 71201

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

Name of Employer Occupation
Benefit Plan Service President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 212.50

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: 9180674

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **126.50**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Miguel Paredes

Mailing Address 5927 Tamarisk

City State Zip Code
San Luis Obispo CA 93401-8281

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

Name of Employer Occupation
Neal Truesdale Ins. Benefits

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

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

Transaction ID: 9180698

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Edward C. Moscato

Mailing Address 1022 RT 34B

City State Zip Code
King Ferry NY 13081

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

Name of Employer Occupation
Edward C. Moscato Insurance and Financ Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 9181047

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Adam Cole McConathy

Mailing Address 607 Kendal Ridge

City State Zip Code
Monroe LA 71201

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

Name of Employer Occupation
MetLife Financial Services Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: 9181089

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

142.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jesse W. Markham

Mailing Address 1122 Elm St
Suite 802

City Honolulu State HI Zip Code 96814-2209

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

Name of Employer Aflac Occupation District Sales Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9181113
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Connie Y. Golleher

Mailing Address PO Box 255

City Mc Lean State VA Zip Code 22101-0255

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

Name of Employer The Holleman Companies Occupation Director of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9181558
Amount of Each Receipt this Period 51.00

C. Full Name (Last, First, Middle Initial)
Sharon G. Heierman

Mailing Address 2990 Kemp Rd

City Havana State FL Zip Code 32333-5753

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

Name of Employer NAIFA - Florida Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2010
Transaction ID: 9181760
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 143.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Roger S. McCullough

Mailing Address 2759 19th Ave N

City State Zip Code
Fort Dodge IA 50501-7838

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

Name of Employer AXA Equitable Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3060.60

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

Transaction ID: 9181806

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Ms. Elaine J. Fremling

Mailing Address 715 Northridge Way

City State Zip Code
West Fargo ND 58078-4365

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

Name of Employer Northwestern Mutual Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 9181808

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
Mr. Jaford D. Burgad

Mailing Address 3842 N. 10th St.

City State Zip Code
Fargo ND 58102-1044

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

Name of Employer Mutual of Omaha Companies Occupation Investment Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

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

Transaction ID: 9181820

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **720.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. John P. Steele

Mailing Address 122 West Main

City State Zip Code
Manhattan MT 59741

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

Name of Employer Occupation
Montana Employee Benefit Insurance Agent
Co.

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2010

Transaction ID: 9181822

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Mr. John P. Steele

Mailing Address 122 West Main

City State Zip Code
Manhattan MT 59741

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

Name of Employer Occupation
Montana Employee Benefit Insurance Agent
Co.

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2010

Transaction ID: 9181852

Amount of Each Receipt this Period
195.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lester E. Westgard

Mailing Address 2714 26th Ave SW

City State Zip Code
Fargo ND 58103-5006

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

Name of Employer Occupation
The Principal Financial Special Marketing Developer
Group

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2010

Transaction ID: 9181854

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **315.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. James W. Simons

Mailing Address 908 Village Avenue, SE

City State Zip Code
Minot ND 58701

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

Name of Employer: First Command Financial Planning
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt: 05 / 11 / 2010
Transaction ID: 9181893
Amount of Each Receipt this Period: 81.00

B. Full Name (Last, First, Middle Initial)
Mr. Lester E. Westgard

Mailing Address 2714 26th Ave SW

City State Zip Code
Fargo ND 58103-5006

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

Name of Employer: The Principal Financial Group
Occupation: Special Marketing Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt: 05 / 11 / 2010
Transaction ID: 9181961
Amount of Each Receipt this Period: 42.00

C. Full Name (Last, First, Middle Initial)
Mr. Jason D. Middaugh

Mailing Address 3307 Maple Street

City State Zip Code
Fargo ND 58102-1230

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

Name of Employer: Middaugh & Associates, Inc.
Occupation: AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 120.00

Date of Receipt: 05 / 11 / 2010
Transaction ID: 9181963
Amount of Each Receipt this Period: 120.00

SUBTOTAL of Receipts This Page (optional) ► 243.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) Mr. Jason D. Middaugh		Date of Receipt MM / DD / YYYY 05 / 11 / 2010
Mailing Address 3307 Maple Street		Transaction ID: 9181965
City	State	Zip Code
Fargo	ND	58102-1230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Middaugh & Associates, In-c.	Occupation AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.

Full Name (Last, First, Middle Initial) Mr. Phil M. Haug		Date of Receipt MM / DD / YYYY 05 / 11 / 2010
Mailing Address 114 38 1/2 Ave, W		Transaction ID: 9182022
City	State	Zip Code
West Fargo	ND	58078
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer Northern Lights Agency	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.

Full Name (Last, First, Middle Initial) Mr. Daniel E. Peterson		Date of Receipt MM / DD / YYYY 05 / 11 / 2010
Mailing Address 3417 42nd Ave SW		Transaction ID: 9182024
City	State	Zip Code
Fargo	ND	58104-6665
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer E 4 Brokerage LLC	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00	

SUBTOTAL of Receipts This Page (optional)	▶	420.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel E. Peterson

Mailing Address 3417 42nd Ave SW

City State Zip Code
Fargo ND 58104-6665

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

Name of Employer Occupation
E 4 Brokerage LLC President & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 384.00

Date of Receipt

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

Transaction ID: 9182026

Amount of Each Receipt this Period

324.00

B.

Full Name (Last, First, Middle Initial)
Mr. Stephen J. Gowers

Mailing Address 2809 Avenue of The Woods

City State Zip Code
Louisville KY 40241-6233

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

Name of Employer Occupation
Capitas Financial, LLC President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 1 0

Transaction ID: 9182286

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Rosenzweig

Mailing Address 13 Augusta Lane

City State Zip Code
Manhasset NY 11030-3909

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

Name of Employer Occupation
Rosenzweig Financial Services Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: 9182302

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1424.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. B. Douglas Trainer

Mailing Address P. O. Box 270
113 Glendale Road

City Pine Forge State PA Zip Code 19548-0270

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

Name of Employer Nationwide Securities LLC Occupation Financial Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2010

Transaction ID: 9182316

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael L. Kerley

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

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

Name of Employer NAIFA Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
522.50

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: 9182346

Amount of Each Receipt this Period
52.25

C.

Full Name (Last, First, Middle Initial)
Mr. Gregg S. Neiman

Mailing Address One North Wacker Dr.Ste 4600

City Chicago State IL Zip Code 60606-2841

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

Name of Employer Northwestern Mutual Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2010

Transaction ID: 9182398

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **802.25**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Royall R. Brown, Jr.		Date of Receipt MM / DD / YYYY 05 / 28 / 2010		
	Mailing Address 2617 Audubon Dr		Transaction ID: 9182400		
	City Winston Salem	State NC	Zip Code 27106-5854	Amount of Each Receipt this Period 550.00	
	FEC ID number of contributing federal political committee. C		Name of Employer Northwestern Mutual		
Occupation District Agent		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 550.00					

B.	Full Name (Last, First, Middle Initial) Mr. Emmette F. Albritton, II		Date of Receipt MM / DD / YYYY 05 / 26 / 2010		
	Mailing Address 20683 Running Creek Church Road Suite A		Transaction ID: 9182420		
	City Stanfield	State NC	Zip Code 28163	Amount of Each Receipt this Period 110.00	
	FEC ID number of contributing federal political committee. C		Name of Employer Albritton Insurance Group		
Occupation General Agent		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 385.00					

C.	Full Name (Last, First, Middle Initial) Mr. Steven M. Stratton		Date of Receipt MM / DD / YYYY 05 / 28 / 2010		
	Mailing Address 17131 Parkview Dr		Transaction ID: 9182432		
	City Morgan Hill	State CA	Zip Code 95037-6606	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Name of Employer Financial & Insurance Services		
Occupation PARTNER		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 575.00					

SUBTOTAL of Receipts This Page (optional)	710.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City State Zip Code
Washington VA 20001-5006

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

Name of Employer NAIFA Occupation Sr VP Law & Govt Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: 9182436

Amount of Each Receipt this Period
31.25

B.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln
PO Box 2433

City State Zip Code
Cody WY 82414-2433

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

Name of Employer Taggart Company Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: 9182464

Amount of Each Receipt this Period
-50.00

C.

Full Name (Last, First, Middle Initial)
Mr. David G. Zick

Mailing Address 851 Adams Court

City State Zip Code
Bloomfield Hills MI 48304-3704

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

Name of Employer Group Associates, Inc. Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2010

Transaction ID: 9182466

Amount of Each Receipt this Period
625.00

SUBTOTAL of Receipts This Page (optional) ► **606.25**

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

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

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

FOR LINE NUMBER: PAGE 84 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City State Zip Code
Hendersonville TN 37075-8587

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 168.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: 9182468

Amount of Each Receipt this Period
-42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas F. Flournoy, Jr.

Mailing Address 5300 Zebulon Rd

City State Zip Code
Macon GA 31210-2199

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

Name of Employer Occupation
New York Life General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 168.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: 9182472

Amount of Each Receipt this Period
-42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert F. Decker

Mailing Address 9290 W Dodge Rd
Suite 102

City State Zip Code
Omaha NE 68114-3320

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

Name of Employer Occupation
Manulife Financial

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: 9182478

Amount of Each Receipt this Period
625.00

SUBTOTAL of Receipts This Page (optional) ▶

541.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. William H. Brockman

Mailing Address 6308 Queens Chapel Rd.

City State Zip Code
University Park MD 20872

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

Name of Employer Early, Cassidy & Schilling Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2010

Transaction ID: 9182495

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph M. Partise

Mailing Address 3540 Fern Circle

City State Zip Code
Seal Beach CA 90740-2846

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

Name of Employer Joe Partise, CLU & Assoc. Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: 9182552

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Dennis P. Sunderman

Mailing Address 2325 Jeans Ct

City State Zip Code
Signal Hill CA 90755-4047

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

Name of Employer Eldercare Insurance Services Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2010

Transaction ID: 9182556

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. Jill Edwards

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042-1260

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

Name of Employer NAIFA Occupation Director of Federal Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.30

Date of Receipt: 05 / 28 / 2010
Transaction ID: 9182560
Amount of Each Receipt this Period: 20.83

B.

Full Name (Last, First, Middle Initial)
Mr. Harlynn N. Bjerke

Mailing Address P. O. Box 144

City Adams State ND Zip Code 58210-0144

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

Name of Employer Mutual of Omaha Companies Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 05 / 14 / 2010
Transaction ID: 9182568
Amount of Each Receipt this Period: 120.00

C.

Full Name (Last, First, Middle Initial)
Mr. Harlynn N. Bjerke

Mailing Address P. O. Box 144

City Adams State ND Zip Code 58210-0144

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

Name of Employer Mutual of Omaha Companies Occupation AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.00

Date of Receipt: 05 / 14 / 2010
Transaction ID: 9182570
Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ► 179.83

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Terry R. Thayer

Mailing Address 353 Prospector Trail

City State Zip Code
Bozeman MT 59718-7974

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

Name of Employer Occupation
Thayer Agency Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 151.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 1 0

Transaction ID: 9182572

Amount of Each Receipt this Period
-50.40

B.

Full Name (Last, First, Middle Initial)

Mr. Jonathan P. Spilde

Mailing Address 1756 Montego Drive

City State Zip Code
Bismark ND 58503

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

Name of Employer Occupation
Schmidt Insurance - SIA Marketing Marketing Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

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

Transaction ID: 9182676

Amount of Each Receipt this Period
240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City State Zip Code
Sioux Falls SD 57103-7248

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

Name of Employer Occupation
Modern Woodmen of America Regional Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 0

Transaction ID: 9182684

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

239.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Scott R. Bunkers

Mailing Address 1320 Magnolia Bay Ct.

City State Zip Code
Maitland FL 32751-6472

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

Name of Employer Occupation
Insurance Consultants Central FL OWNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 0

Transaction ID: 9182690

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony DiBernardo

Mailing Address 8291 Elmcrest Lane

City State Zip Code
Huntington Bch. CA 92646

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

Name of Employer Occupation
Flexible Insurance Plans, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: 9182698

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Spencer L. Hawley

Mailing Address 1215 W. 8th Street, South

City State Zip Code
Brookings SD 57006

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

Name of Employer Occupation
Hawley Insurance Services Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 352.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 0

Transaction ID: 9182722

Amount of Each Receipt this Period

327.50

SUBTOTAL of Receipts This Page (optional)

1327.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Jon G. Beebe	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 14 16th Street, S E	Transaction ID: 9182732
	City State Zip Code Watertown SD 57201	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Knights of Columbus Occupation Field Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 62.50

B.	Full Name (Last, First, Middle Initial) Mr. Jon G. Beebe	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 14 16th Street, S E	Transaction ID: 9182734
	City State Zip Code Watertown SD 57201	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Knights of Columbus Occupation Field Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50

C.	Full Name (Last, First, Middle Initial) Mr. Jeffery A. Skinner	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 5713 S Tomar Rd	Transaction ID: 9182758
	City State Zip Code Sioux Falls SD 57108-4656	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Midland National Life/Sammons Securit Occupation Financial Planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00

SUBTOTAL of Receipts This Page (optional)	487.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 120

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jack B. Turner

Mailing Address 310 Fairway Drive

City State Zip Code
Clarksville TN 37043-4729

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

Name of Employer Occupation
Jack B. Turner & Associates, Inc Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: 9182788

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Adam D. Weeman

Mailing Address 6216 W Coughran Ct

City State Zip Code
Sioux Falls SD 57106

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

Name of Employer Occupation
Thrivent Financial Financial Consultant

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 312.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 0

Transaction ID: 9182815

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jack P. Dewald, Jr.

Mailing Address 10305 W Shrewsbury Rn

City State Zip Code
Collierville TN 38017-0237

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

Name of Employer Occupation
Agency Services Incorporated General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 562.50

Date of Receipt

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

Transaction ID: 9182825

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Mark D. Johnson

Mailing Address 199 Billings Dr

City State Zip Code
Superior WI 54880-4467

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

Name of Employer Johnson Insurance Consul-
tants Occupation Agent/Consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 9182837

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Martin Berger

Mailing Address 111 - 5th Ave SW PO Box 69

City State Zip Code
Epworth IA 52045

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

Name of Employer Berger Benefit Connections Occupation AGENT

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

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

Transaction ID: 9182839

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
Mr. Walter J. Shields

Mailing Address 3020 - 38th Avenue West

City State Zip Code
Seattle WA 98199-2513

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

Name of Employer Kibble & Prentice Occupation Senior Sales Executive

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 9182851

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Ms. Robin Johnston

Mailing Address 1250 Capital of TX Hwy South
Bldg. 2, Ste. 125

City Austin State TX Zip Code 78746

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

Name of Employer National Financial Partners Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 21 / 2010
Transaction ID: 9182865
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Linda S. Brandon

Mailing Address 436 N Main

City Wasilla State AK Zip Code 99654-7018

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

Name of Employer State Farm Insurance Companies Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 20 / 2010
Transaction ID: 9182875
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Kent S. Kallander

Mailing Address PO Box 771071

City Eagle River State AK Zip Code 99577-1071

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

Name of Employer Anchorage Agency Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 20 / 2010
Transaction ID: 9182877
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 93 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Allen O. Bowler, Jr.
Mailing Address P. O. Box 772828
City Eagle River State AK Zip Code 99577-2828
FEC ID number of contributing federal political committee. **C**
Name of Employer State Farm Insurance Companies Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 05 / 20 / 2010
Transaction ID: 9182883
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael J. Edens
Mailing Address 1012 Endicott
City Chattanooga State TN Zip Code 37405
FEC ID number of contributing federal political committee. **C**
Name of Employer John Hancock Financial Services Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 05 / 21 / 2010
Transaction ID: 9182916
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. John Jay Fletcher
Mailing Address 4003 Willow St
City Pascagoula State MS Zip Code 39567-2146
FEC ID number of contributing federal political committee. **C**
Name of Employer Nationwide Insurance Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 21 / 2010
Transaction ID: 9182920
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 800.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 94 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City Hendersonville State TN Zip Code 37075-8587

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

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

Transaction ID: 9182930

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. David A. Beaty

Mailing Address Thunder Ridge Mall- Lower West
2302 W 1st St, Suite 120

City Cedar Falls State IA Zip Code 50613

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

Name of Employer Heartland Financial Services Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 9182938

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ms. Brenda S. Speer

Mailing Address 126 Sunset Dr

City Pulaski State TN Zip Code 38478-3631

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

Name of Employer Professional Benefit Solutions, LLC Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: 9183000

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 120
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mr. Richard G. Ek	Date of Receipt MM / DD / YYYY 05 / 24 / 2010
	Mailing Address 13831 51st DR SE	Transaction ID: 9183042
	City State Zip Code Everett WA 98208-9543	Amount of Each Receipt this Period 350.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ek & Ek Insurance Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.50

B.	Full Name (Last, First, Middle Initial) Mr. J. Chris LeBlanc	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 751 Walnut Knoll Lane	Transaction ID: 9183076
	City State Zip Code Cordova TN 38018	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Milestone Financial Group, Inc. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) Mr. Ron E. Mischke	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 2 N. Main #409	Transaction ID: 9183086
	City State Zip Code Sheridan WY 82801	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Mountain West Farm Bureau Occupation Agency Manager 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)	1350.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. John R. Milam

Mailing Address 426 Heathermoor

City State Zip Code
Knoxville TN 37922

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

Name of Employer Willis of Tennessee, Inc. Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 25 / 2010
Transaction ID: 9183104
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. John C. Johns

Mailing Address 5141 Lilly Rd.

City State Zip Code
Hazlehurst MS 39083

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

Name of Employer Southern Farm Bureau Life Insurance Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt: 05 / 25 / 2010
Transaction ID: 9183106
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred Nicol, Jr.

Mailing Address 1240 Hilltop Rd

City State Zip Code
Riverton WY 82501-9240

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

Name of Employer MetLife Financial Services Occupation Financial Services Exec.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 25 / 2010
Transaction ID: 9183112
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Bussard

Mailing Address 5256 Lysander Lane

City State Zip Code
Brentwood TN 37027-3110

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

Name of Employer Pacific Life Insurance Company
Occupation Regional Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183120

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. John E. Parham, Jr.

Mailing Address 6840 Carothers Parkway Suite 100

City State Zip Code
Franklin TN 37067

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

Name of Employer Parham Agency
Occupation Branch Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183122

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Dewane Lewis, Jr.

Mailing Address 308 Stillcreek Dr

City State Zip Code
Franklin TN 37064-6154

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

Name of Employer American General Life & Accident Insur
Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183124

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **875.00**

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

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

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

FOR LINE NUMBER: PAGE 98 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Brad P Seitzinger

Mailing Address 901 Wilshire Dr Ste 300

City State Zip Code
Troy MI 48084-5611

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

Name of Employer Occupation
Northwestern Mutual Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183126

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Scott D. Colby

Mailing Address 7077 E. Central #8

City State Zip Code
Wichita KS 67206-1929

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

Name of Employer Occupation
New England Financial A Financial Representative
Met Life Compa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183134

Amount of Each Receipt this Period
480.00

C. Full Name (Last, First, Middle Initial)
Mr. Scott D. Colby

Mailing Address 7077 E. Central #8

City State Zip Code
Wichita KS 67206-1929

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

Name of Employer Occupation
New England Financial A Financial Representative
Met Life Compa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183136

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1280.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 120
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)
Ms. M. Kay Mielke-Crookshanks

Mailing Address 18542 Elderberry St SW

City State Zip Code
Rochester WA 98579-8722

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

Name of Employer Occupation
Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183144

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Ms. Joye LeAnn Nalls

Mailing Address 1450 Warburton Rd

City State Zip Code
Victoria TX 77905-4321

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

Name of Employer Occupation
Nalls Insurance and Financial Services Owner/Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183167

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City State Zip Code
Hendersonville TN 37075-8587

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

Name of Employer Occupation
Northwestern Mutual Financial Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 168.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2010

Transaction ID: 9183183

Amount of Each Receipt this Period
-250.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

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

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

FOR LINE NUMBER: PAGE 100 / 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial)
Mr. Jay A. Ochanpaugh

Mailing Address PO Box 2485

City State Zip Code
Ames IA 50010-2485

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

Name of Employer Occupation
Ochanpaugh Financial President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID: 9183197

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	32429.23

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

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

FOR LINE NUMBER:
(check only one)

PAGE 101 / 120

<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Guthrie For Congress	Transaction ID: 9111566 Date of Disbursement
	Mailing Address PO Box 9639	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Bowling Green State KY Zip Code 42102	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Rep. Brett Guthrie	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Volunteers For Shimkus	Transaction ID: 9111567 Date of Disbursement
	Mailing Address PO Box 5458	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Springfield State IL Zip Code 62705	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. John M. Shimkus	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hatch Election Committee Inc	Transaction ID: 9111568 Date of Disbursement
	Mailing Address 175 South West Temple Suite 650	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Salt Lake City State UT Zip Code 84101	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name Sen. Orrin G. Hatch	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 120

<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Heller For Congress	Transaction ID: 9111569 Date of Disbursement 05 / 04 / 2010
	Mailing Address PO Box 750580	Amount of Each Disbursement this Period 2500.00
	City Las Vegas State NV Zip Code 89136	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Dean Heller	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) David Scott For Congress	Transaction ID: 9111570 Date of Disbursement 05 / 04 / 2010
	Mailing Address P.O. Box 960821	Amount of Each Disbursement this Period 3000.00
	City Riverdale State GA Zip Code 30296	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. David A. Scott	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Charles Boustany Jr Md For Congress, Inc	Transaction ID: 9111571 Date of Disbursement 05 / 04 / 2010
	Mailing Address PO Box 80126	Amount of Each Disbursement this Period 2500.00
	City Lafayette State LA Zip Code 70598	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Charles W. Boustany, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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 103 / 120

<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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Wyden For Senate</p> <p>Mailing Address PO Box 3498</p> <p>City Portland State OR Zip Code 97208</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Sen. Ron Wyden</p> <p>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) ▼</p> <p>State: OR District:</p>	<p>Transaction ID: 9111572</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <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>5</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	4	/	2	0	1	0	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	4	/	2	0	1	0													
2000.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Becerra For Congress</p> <p>Mailing Address P.O. Box 261060</p> <p>City Los Angeles State CA Zip Code 90026</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Xavier Becerra</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 31</p>	<p>Transaction ID: 9124084</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <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>5</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	6	/	2	0	1	0	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	6	/	2	0	1	0													
1500.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Joe Donnelly For Congress</p> <p>Mailing Address PO Box 1961</p> <p>City South Bend State IN Zip Code 46634</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Joseph Donnelly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IN District: 02</p>	<p>Transaction ID: 9124090</p> <p>Date of Disbursement <table border="1" style="width: 100%;"> <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>5</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	6	/	2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	6	/	2	0	1	0													
2500.00																						

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)

<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Friends Of Jeb Hensarling	Transaction ID: 9124091 Date of Disbursement
	Mailing Address PO Box 820504	<input type="text" value="05"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Dallas State TX Zip Code 75382	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Rep. Jeb Hensarling	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee	Transaction ID: 9124094 Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="05"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Prescott State AR Zip Code 71857	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1500.00"/>
	Candidate Name Rep. Michael A. Ross	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Dan Maffei	Transaction ID: 9144555 Date of Disbursement
	Mailing Address PO Box 74	<input type="text" value="05"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Syracuse State NY Zip Code 13214	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name Rep. Daniel B. Maffei	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) Lance For Congress</p> <p>Mailing Address PO Box 225</p> <p>City Colonia State NJ Zip Code 07067</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Leonard Lance</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: NJ District: 07</p>	<p>Transaction ID: 9144556 Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Castle Campaign Fund</p> <p>Mailing Address PO Box 133</p> <p>City Wilmington State DE Zip Code 19899</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Michael N. Castle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 01</p>	<p>Transaction ID: 9144557 Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress</p> <p>Mailing Address P.O. Box 2232</p> <p>City Jenkintown State PA Zip Code 19046</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Allyson Y. Schwartz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 13</p>	<p>Transaction ID: 9144558 Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee</p> <p>Mailing Address PO Box 87</p> <p>City Uwchland State PA Zip Code 19480</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. James W. Gerlach</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 06</p>	<p>Transaction ID: 9144559 Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Friends Of Carolyn Mccarthy</p> <p>Mailing Address 151 Linden Road</p> <p>City Mineola State NY Zip Code 11501</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Carolyn McCarthy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NY District: 04</p>	<p>Transaction ID: 9144560 Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Defend America PAC</p> <p>Mailing Address PO Box 2626</p> <p>City Tuscaloosa State AL Zip Code 35403</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: 9144561 Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Kosmas For Congress	Transaction ID: 9144562 Date of Disbursement 05 / 17 / 2010
	Mailing Address PO Box 1547	Amount of Each Disbursement this Period 1000.00
	City New Smyrna Beach State FL Zip Code 32170	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Suzanne M. Kosmas	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John Campbell For Congress	Transaction ID: 9144567 Date of Disbursement 05 / 17 / 2010
	Mailing Address 4590 Macarthur Boulevard Suite 500	Amount of Each Disbursement this Period 1500.00
	City Newport Beach State CA Zip Code 92660	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. John Campbell	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John Campbell For Congress	Transaction ID: 9144568 Date of Disbursement 05 / 17 / 2010
	Mailing Address 4590 Macarthur Boulevard Suite 500	Amount of Each Disbursement this Period 1000.00
	City Newport Beach State CA Zip Code 92660	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. John Campbell	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3500.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) ScottPAC	Transaction ID: 9144692 Date of Disbursement 05 / 17 / 2010
	Mailing Address 1305 East Abingdon Drive #2	Amount of Each Disbursement this Period 2500.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 Category/Type
	Candidate Name ScottPAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Judy Biggert For Congress	Transaction ID: 9144693 Date of Disbursement 05 / 17 / 2010
	Mailing Address P.O. Box 637	Amount of Each Disbursement this Period 1000.00
	City Hinsdale State IL Zip Code 60522	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Judy Biggert	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: IL District: 13	

C.	Full Name (Last, First, Middle Initial) Hoeven For Senate	Transaction ID: 9144694 Date of Disbursement 05 / 17 / 2010
	Mailing Address PO Box 15114	Amount of Each Disbursement this Period 5000.00
	City Arlington State VA Zip Code 22215	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. John Hoeven	
	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: ND District:	

SUBTOTAL of Disbursements This Page (optional) ► **8500.00**

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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Cardoza for Congress	Transaction ID: 9145873 Date of Disbursement 05 / 19 / 2010
	Mailing Address 555 Capitol Mall Suite 1425	Amount of Each Disbursement this Period 1000.00
	City Sacramento State CA Zip Code 95814	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Dennis Cardoza	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: CA District: 18	

B.	Full Name (Last, First, Middle Initial) Sherman For Congress	Transaction ID: 9145874 Date of Disbursement 05 / 19 / 2010
	Mailing Address 555 So. Flower St. Suite 4210	Amount of Each Disbursement this Period 1000.00
	City Los Angeles State CA Zip Code 90071	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Brad Sherman	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: CA District: 27	

C.	Full Name (Last, First, Middle Initial) Richard Burr Committee	Transaction ID: 9145875 Date of Disbursement 05 / 19 / 2010
	Mailing Address Post Office Box 5928	Amount of Each Disbursement this Period 1000.00
	City Winston-Salem State NC Zip Code 27113	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Richard M. Burr	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NC District:	

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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Coburn for Senate Committee</p> <p>Mailing Address 3300 West Okmulgee P.O. Box 977</p> <p>City Muskogee State OK Zip Code 74401</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Thomas Coburn</p> <p>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) ▼</p> <p>State: OK District:</p>	<p>Transaction ID: 9145876</p> <p>Date of Disbursement 05 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Georgians For Isakson</p> <p>Mailing Address Post Office Box 250116</p> <p>City Atlanta State GA Zip Code 30325</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Sen. Johnny Isakson</p> <p>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) ▼</p> <p>State: GA District:</p>	<p>Transaction ID: 9145877</p> <p>Date of Disbursement 05 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) John Thune for South Dakota</p> <p>Mailing Address PO Box 516 PO Box 516</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name John Thune</p> <p>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) ▼</p> <p>State: SD District:</p>	<p>Transaction ID: 9145878</p> <p>Date of Disbursement 05 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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 111 / 120

<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)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Friends Of John McCain Inc <hr/> Mailing Address PO Box 16664 <hr/> City Arlington State VA Zip Code 22215 <hr/> Purpose of Disbursement <hr/> Candidate Name Sen. John S. McCain <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9145879 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Adler For Congress <hr/> Mailing Address 14 Knightswood Drive <hr/> City Marlton State NJ Zip Code 08053 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. John Herbert Adler <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9145880 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cooper For Congress <hr/> Mailing Address C/O Davidson, Golden & Lundy P.O. Box 927 <hr/> City Brentwood State TN Zip Code 37024 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Jim Cooper <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 05 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9150130 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Montanans For Tester	Transaction ID: 9150131 Date of Disbursement
	Mailing Address PO Box 1135	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Helena State MT Zip Code 59624	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Sen. Jon Tester	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bachmann For Congress	Transaction ID: 9150133 Date of Disbursement
	Mailing Address PO Box 25950	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Woodbury State MN Zip Code 55125	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1500.00"/>
	Candidate Name Rep. Michele Bachmann	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jim Himes For Congress	Transaction ID: 9150135 Date of Disbursement
	Mailing Address 857 Post Road, #312 Box 456	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Fairfield State CT Zip Code 06824	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. James A. Himes	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)

National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Hoyer For Congress <hr/> Mailing Address 4201 Northview Dr, Ste 307 <hr/> City Bowie State MD Zip Code 20716 <hr/> Purpose of Disbursement 011 Candidate Name Rep. Steny H. Hoyer Office Sought: <input checked="" type="checkbox"/> House <input 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: MD District: 05	Transaction ID: 9150161 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; width: 100%;">2500.00</div>
B.	Full Name (Last, First, Middle Initial) AMERIPAC <hr/> Mailing Address 499 South Capitol St, SW #414 <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement 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: 9150506 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; width: 100%;">0.00</div>
C.	Full Name (Last, First, Middle Initial) Bob Corker for Senate, Inc. <hr/> Mailing Address PO Box 848 <hr/> City Chatanooga State TN Zip Code 37401 <hr/> Purpose of Disbursement 011 Candidate Name Bob Corker 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: TN District:	Transaction ID: 9150679 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; width: 100%;">1000.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">3500.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

**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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mike Crapo For Us Senate	Transaction ID: 9151056 Date of Disbursement 05 / 24 / 2010
	Mailing Address P.O. Box 1948	Amount of Each Disbursement this Period 1000.00
	City Boise State ID Zip Code 83701	
	Purpose of Disbursement Candidate Name Sen. Mike Crapo Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District:	

B.	Full Name (Last, First, Middle Initial) Childers For Congress	Transaction ID: 9151336 Date of Disbursement 05 / 24 / 2010
	Mailing Address PO Box 177	Amount of Each Disbursement this Period 1000.00
	City Booneville State MS Zip Code 38829	
	Purpose of Disbursement Candidate Name Rep. Travis Wayne Childers Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: MS District: 01	

C.	Full Name (Last, First, Middle Initial) AMERIPAC	Transaction ID: 9156238 Date of Disbursement 05 / 25 / 2010
	Mailing Address 499 South Capitol St, SW #414	Amount of Each Disbursement this Period 0.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Void - AMERIPAC Candidate Name Category/Type 011	
	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:	Void - AMERIPAC

SUBTOTAL of Disbursements This Page (optional)	2000.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) AMERIPAC	Transaction ID: 9156828 Date of Disbursement 05 / 25 / 2010
	Mailing Address 499 South Capitol St, SW #414	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn	Transaction ID: 9160342 Date of Disbursement 05 / 27 / 2010
	Mailing Address PO Box 12567	Amount of Each Disbursement this Period 2500.00
	City Columbia State SC Zip Code 29211	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. James E. Clyburn	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Blanche Lincoln	Transaction ID: 9160343 Date of Disbursement 05 / 27 / 2010
	Mailing Address PO Box 3197	Amount of Each Disbursement this Period 5000.00
	City Little Rock State AR Zip Code 72203	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Blanche Lambert Lincoln	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff2010

SUBTOTAL of Disbursements This Page (optional)	12500.00
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)
National Association of Insurance and Financial Advisors Political Action Comm

<p>A. Full Name (Last, First, Middle Initial) John Spratt For Congress Committee</p> <p>Mailing Address Post Office Box 10986</p> <p>City Rock Hill State SC Zip Code 29731</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. John M. Spratt, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: SC District: 05</p>	<p>Transaction ID: 9160344 Date of Disbursement 05 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) GOAL PAC</p> <p>Mailing Address PO Box 30344</p> <p>City Bethesda State MD Zip Code 20824</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name GOAL PAC</p> <p>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:</p>	<p>Transaction ID: 9160348 Date of Disbursement 05 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Leadership for Today and Tomorrow</p> <p>Mailing Address 607 14th Street, NW/Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Leadership for Today and Tomorrow</p> <p>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:</p>	<p>Transaction ID: 9160349 Date of Disbursement 05 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Pascrell For Congress Inc.	Transaction ID: 9160350 Date of Disbursement 05 / 27 / 2010
	Mailing Address Pob 640	
	City Totowa State NJ Zip Code 07511	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. William J. Pascrell, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ERIC PAC	Transaction ID: 9160351 Date of Disbursement 05 / 27 / 2010
	Mailing Address 209 Pennsylvania Avenue, SE	
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) We the People PAC	Transaction ID: 9160353 Date of Disbursement 05 / 27 / 2010
	Mailing Address PO Box 2232	
	City Jenkintown State PA Zip Code 19046	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name We the People PAC	
	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) ▼

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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Dirigo PAC

Mailing Address PO Box 1355

City
Alexandria

State
VA

Zip Code
22313-1355

Purpose of Disbursement

Category/
Type

Candidate Name
Dirigo PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 9160354

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)

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<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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address P.O. box 40031

City
Roanoke

State
VA

Zip Code
24022-0031

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 9192659

Date of Disbursement

/ /

Amount of Each Disbursement this Period

bank fees

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 120 / 120
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Association of Insurance and Financial Advisors Political Action Comm	Nature of Debt (Purpose): Payroll, Benefits, Suppl- es, Copies
Mailing Address 2901 Telestar Ct	
City State ZIP Code Falls Church VA 22042	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">28585.53</div>	Transaction ID: 9192663
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">33917.44</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">62502.97</div>	

1) SUBTOTALS This Period This Page (optional).....	<div style="border: 1px solid black; padding: 2px;">62502.97</div>
2) TOTALS This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px;">62502.97</div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<div style="border: 1px solid black; padding: 2px;">0.00</div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<div style="border: 1px solid black; padding: 2px;">62502.97</div>