



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
USINPAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

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>X</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>	X	Y	Y	Y	2	0	1	0		2152.16
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	10096.08									
(c) Total Receipts (from Line 19) .....	14268.98	27795.85								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	24365.06	29948.01								
7. Total Disbursements (from Line 31) .....	11073.38	16656.33								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	13291.68	13291.68								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
USINPAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

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) .....	13760.00	26485.87
(ii) Unitemized .....	500.00	1301.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	14260.00	27786.87
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	14260.00	27786.87
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) .....	8.98	8.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	14268.98	27795.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14268.98	27795.85

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	82.95
(b) Other Federal Operating Expenditures.....	4073.38	7073.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4073.38	7156.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	7000.00	9500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11073.38	16656.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11073.38	16656.33

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) .....	14260.00	27786.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14260.00	27786.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4073.38	7073.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	8.98	8.98
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4064.40	7064.40

**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 / 17
	<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)  
USINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Virendra Datta	Date of Receipt MM / DD / YYYY 08 / 10 / 2010
	Mailing Address 1447 Maryland Ave NE	<b>Transaction ID:</b> A2010-3588394
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation New York Liquors Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Navin Goel	Date of Receipt MM / DD / YYYY 07 / 28 / 2010
	Mailing Address PO Box 33	<b>Transaction ID:</b> A2010-3588381
	City State Zip Code Perry Hall MD 21128	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Goel Enterprises Entrepreneur	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Navin Goel	Date of Receipt MM / DD / YYYY 08 / 30 / 2010
	Mailing Address PO Box 33	<b>Transaction ID:</b> A2010-3588380
	City State Zip Code Perry Hall MD 21128	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Goel Enterprises Entrepreneur	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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

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NAME OF COMMITTEE (In Full)  
USINPAC

**A.** Full Name (Last, First, Middle Initial)  
Vanathi Gopalakrishnan

Mailing Address 107 Parkview Blvf.

City State Zip Code  
Pittsburgh PA 15217

FEC ID number of contributing federal political committee. C

Name of Employer Information requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2010  
**Transaction ID: A2010-3588397**

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Vanathi Gopalakrishnan

Mailing Address 107 Parkview Blvf.

City State Zip Code  
Pittsburgh PA 15217

FEC ID number of contributing federal political committee. C

Name of Employer Information requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 20 / 2010  
**Transaction ID: A2010-3588400**

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Preetham Gowda

Mailing Address 444 Chatham Park Drive Apt C

City State Zip Code  
Pittsburgh PA 15220

FEC ID number of contributing federal political committee. C

Name of Employer Information requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2010  
**Transaction ID: A2010-3588398**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 700.00

**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 8 / 17

(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)  
USINPAC

**A.**

Full Name (Last, First, Middle Initial)  
Aparna Puri

Mailing Address 1100 Safa Street

City State Zip Code  
Herndon VA 20170

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

Name of Employer Occupation  
Information requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 22 / 2010

Transaction ID: A2010-3588399

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Sanjay Puri

Mailing Address 11490 Commerce Park Drive

City State Zip Code  
Reston VA 20191

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

Name of Employer Occupation  
Optimos Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 19 / 2010

Transaction ID: A2010-3588387

Amount of Each Receipt this Period

560.00

**C.**

Full Name (Last, First, Middle Initial)  
Sanjay Puri

Mailing Address 11490 Commerce Park Drive

City State Zip Code  
Reston VA 20191

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

Name of Employer Occupation  
Optimos Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5560.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 20 / 2010

Transaction ID: A2010-3588392

Amount of Each Receipt this Period

5000.00

Excessive portion of contribution to be refunded April, 2011

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

10560.00

**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 / 17	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
USINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Rajat Vij		Date of Receipt	
	Mailing Address 14300 Gallant Fox Lane Ste 210		M M / D D / Y Y Y Y 08 / 10 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-3588393
	Bowie	MD	20715	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		250.00	
Name of Employer Bowie Health Care LLC		Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	13760.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full) USINPAC
--

<b>A.</b>	Full Name (Last, First, Middle Initial) Electronic Mall Technologies	Date of Receipt
	Mailing Address 1101 Pennsylvania Ave. NW	<input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20004	<b>Transaction ID:</b> A9412
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="8.98"/>
	Name of Employer Occupation	Offsets to Oper. Exp
	Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1130.14"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="8.98"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="8.98"/>

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
USINPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Carr Workplaces Mailing Address 1455 Pennsylvania Ave. NW, #400 City Washington State DC Zip Code 20005 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B379011 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 75.00 Category/Type: 001

<b>B.</b> Full Name (Last, First, Middle Initial) Carr Workplaces Mailing Address 1455 Pennsylvania Ave. NW, #400 City Washington State DC Zip Code 20005 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B379012 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 560.00 Category/Type: 001

<b>C.</b> Full Name (Last, First, Middle Initial) Carr Workplaces Mailing Address 1455 Pennsylvania Ave. NW, #400 City Washington State DC Zip Code 20005 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B379013 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 75.00 Category/Type: 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	710.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
USINPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Capitol Host Mailing Address PO Box 77896 City Washington State DC Zip Code 20013 Purpose of Disbursement Catering Expense Candidate Name	Transaction ID: B379031 Date of Disbursement 08 / 17 / 2010
	Amount of Each Disbursement this Period 248.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/ Type 003

<b>B.</b> Full Name (Last, First, Middle Initial) Carr Workplaces Mailing Address 1455 Pennsylvania Ave. NW, #400 City Washington State DC Zip Code 20005 Purpose of Disbursement Rent Candidate Name	Transaction ID: B379014 Date of Disbursement 08 / 27 / 2010
	Amount of Each Disbursement this Period 85.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/ Type 001

<b>C.</b> Full Name (Last, First, Middle Initial) Carr Workplaces Mailing Address 1455 Pennsylvania Ave. NW, #400 City Washington State DC Zip Code 20005 Purpose of Disbursement Rent Candidate Name	Transaction ID: B379015 Date of Disbursement 09 / 21 / 2010
	Amount of Each Disbursement this Period 75.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/ Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	408.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 17

<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)  
USINPAC

A.	Full Name (Last, First, Middle Initial) Paymar Communications	Transaction ID: B379029 Date of Disbursement 08 / 06 / 2010
	Mailing Address 21 Nottingham Road	Amount of Each Disbursement this Period 250.00
	City Rockville Centre State NY Zip Code 11570	
	Purpose of Disbursement Voiceover talent services Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) T Mobile	Transaction ID: B379020 Date of Disbursement 07 / 13 / 2010
	Mailing Address PO Box 742596	Amount of Each Disbursement this Period 468.10
	City Cincinatti State OH Zip Code 45274	
	Purpose of Disbursement Telephone Expense Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) T Mobile	Transaction ID: B379021 Date of Disbursement 08 / 06 / 2010
	Mailing Address PO Box 742596	Amount of Each Disbursement this Period 318.16
	City Cincinatti State OH Zip Code 45274	
	Purpose of Disbursement Telephone Expense Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1036.26
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
USINPAC

A.	Full Name (Last, First, Middle Initial) Corporation Service Company	Transaction ID: B379032 Date of Disbursement
	Mailing Address PO Box 13397	<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Philadelphia State PA Zip Code 19101	Amount of Each Disbursement this Period
	Purpose of Disbursement Business and Legal Services	<input type="text" value="799.20"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) EMMA	Transaction ID: B379033 Date of Disbursement
	Mailing Address np	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Nashville State TN Zip Code 99999	Amount of Each Disbursement this Period
	Purpose of Disbursement E-mail services	<input type="text" value="602.65"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B379008 Date of Disbursement
	Mailing Address P.O. Box 7022	<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Mountain View State CA Zip Code 94039	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="30.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1431.85"/>
<b>TOTAL</b> 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 15 / 17

<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)  
USINPAC

A.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B379024 Date of Disbursement MM / DD / YYYY 08 / 02 / 2010
	Mailing Address P.O. Box 7022	Amount of Each Disbursement this Period 30.00
	City Mountain View State CA Zip Code 94039	
	Purpose of Disbursement Credit Card Processing Fee	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) PayPal Inc.	Transaction ID: B379045 Date of Disbursement MM / DD / YYYY 09 / 02 / 2010
	Mailing Address P.O. Box 7022	Amount of Each Disbursement this Period 30.00
	City Mountain View State CA Zip Code 94039	
	Purpose of Disbursement Credit Card Processing Fee	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

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

60.00

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

3646.11

**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 16 / 17

<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)  
USINPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Faleomavaega for Congress Committee <hr/> Mailing Address L'enfant Plaza Station PO Box 4466 <hr/> City Washington State DC Zip Code 20026 Purpose of Disbursement Contribution Candidate Name Eni F Faleomavaega Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AS District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B378930 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Lewis for Congress Committee <hr/> Mailing Address PO Box 247 <hr/> City Redlands State CA Zip Code 92373 Purpose of Disbursement Contribution Candidate Name Jerry Lewis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B378934 Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Grassley Committee Inc <hr/> Mailing Address PO Box 1000 <hr/> City Des Moines State IA Zip Code 50304 Purpose of Disbursement Contribution Candidate Name Charles E Grassley Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B378935 Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4500.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
USINPAC

A.

Full Name (Last, First, Middle Initial)  
Hoosiers for Rokita

Mailing Address 7643 East U.S. 36

City Avon State IN Zip Code 46123

Purpose of Disbursement  
Contribution

Candidate Name  
Theodore E Rokita

Office Sought:  House  
 Senate  
 President

State: IN District: 04

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: B378933  
Date of Disbursement

09 / 24 / 2010

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
Brad Miller for United States Congress

Mailing Address PO Box 10322

City Raleigh State NC Zip Code 27605

Purpose of Disbursement  
Contribution

Candidate Name  
Brad (Ralph Bradley) Miller

Office Sought:  House  
 Senate  
 President

State: NC District: 13

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: B378929  
Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Pallone for Congress

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Contribution

Candidate Name  
Frank Pallone, Jr.

Office Sought:  House  
 Senate  
 President

State: NJ District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: B378931  
Date of Disbursement

09 / 24 / 2010

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

7000.00