

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED

7/10/12 Notice Only

AM 9:45

12FE4M5 **FEC MAIL CENTER**

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

**EMPOWERING EACH COMMUNITY PIAC**

ADDRESS (number and street)

**5530 WISCONSIN AVENUE**

**SUITE 1209**

**CHEVY CHASE**

**MD**

**20815**

Check if different than previously reported. (ACC)

FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

**00426122**

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

**TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

**10 / 18 / 2012**

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

**11 / 06 / 2012**

in the State of

5. Covering Period

**10 / 18 / 2012**

through

**11 / 26 / 2012**

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

Type or Print Name of Treasurer

**Thomas A. Gentile**

Signature of Treasurer

*Thomas A. Gentile*

Date

**11 / 26 / 2012**

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

Office Use Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

EMPOWERING EACH COMMUNITY PAC

Report Covering the Period: From:

1.0 1.8 2012

To:

1.1 2.6 2012

COLUMN A  
This Period

COLUMN B  
Calendar Year-to-Date

|     |  |          |          |
|-----|--|----------|----------|
| 6.  | (a) Cash on Hand<br>January 1, 2012  |          | 209      |
|     | (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 24,920.9 |          |
|     | (c) Total Receipts (from Line 19).....   | 5,000.00 | 7,580.00 |
|     | (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....  | 7,492.09 | 7,582.09 |
| 7.  | Total Disbursements (from Line 31).....  | 1,000.00 | 1,900.00 |
| 8.  | Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                | 7,392.09 | 7,392.09 |
| 9.  | Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0        |          |
| 10. | Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0        |          |

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

12030964015

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

*EMPOWERING*

Report Covering the Period: From:

MEM ' DD ' YYYY  
10 ' 18 ' 2012

To:

MEM ' DD ' YYYY  
11 ' 26 ' 2012

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

12030964016

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

.....

.....

.....

.....

..... 500000

.....

.....

.....

..... 0

..... 0

..... 0

..... 0

..... 0

..... 0

.....

.....

..... 0

.....

.....

.....

.....

..... 758000

.....

.....

.....

..... 0

..... 0

..... 0

..... 0

..... 0

.....

.....

.....

..... 0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

..... 500000

..... 758000

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

.....

.....



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

|        |
|--------|
| 500000 |
| 0      |
| 500000 |
|        |
|        |
| 00000  |

|        |
|--------|
| 758000 |
| 0      |
| 758000 |
|        |
|        |
| 00000  |

12030964018

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 1

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

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

A. GSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address

1331 PENNSYLVANIA AVE, N.W. #560

City

WASHINGTON, D.C.

State

Zip Code

20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500000

Date of Receipt

11 / 01 / 2012

Amount of Each Receipt this Period

500000

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

500000

12030964019

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 OF

21b 22 23 24 25 26 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

Michelle BARIS

Date of Disbursement

11 / 19 / 2011

Mailing Address

5530 WISCONSIN AVENUE #1209

City State Zip Code

Chevy Chase, Md. 20815

Purpose of Disbursement

DATA ENTRY (OFFICE EXPENSE)

Category/Type

Amount of Each Disbursement this Period

10000

Candidate Name

Office Sought: House Senate President State: District:

Disbursement For: Primary General Other (specify)

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District:

Disbursement For: Primary General Other (specify)

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District:

Disbursement For: Primary General Other (specify)

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

10000

12030964020

A

C



SCHEDULE C-1 (FEC Form 3X)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for Information found on Page \_\_\_ of Schedule C

12030964022

NAME OF COMMITTEE (In Full)
FEC IDENTIFICATION NUMBER
C

LENDING INSTITUTION (LENDER)
Full Name
Amount of Loan
Interest Rate (APR) %

Mailing Address
Date Incurred or Established
Date Due
City State Zip Code

A. Has loan been restructured? No Yes
If yes, date originally incurred

B. If line of credit,
Amount of this Draw:
Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
What is the value of this collateral?
Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes
If yes, specify:
What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).
Location of account:
Address:
City, State, Zip:
Date account established:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
Typed Name
Signature
DATE

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE
Typed Name
Signature
Title
DATE

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one)

9  
10

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

[Grid]

Amount Incurred This Period

[Grid]

Payment This Period

[Grid]

Outstanding Balance at Close of This Period

[Grid]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

[Grid]

Amount Incurred This Period

[Grid]

Payment This Period

[Grid]

Outstanding Balance at Close of This Period

[Grid]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

[Grid]

Amount Incurred This Period

[Grid]

Payment This Period

[Grid]

Outstanding Balance at Close of This Period

[Grid]

1) SUBTOTALS This Period This Page (optional)..... ▶

[Grid]

2) TOTALS This Period (last page this line number only)..... ▶

[Grid]

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶

[Grid]

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

[Grid]

12030964023

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked  
11/27/12

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*Amf*

PREPARER  
(3/2005)

12/4/12  
DATE PREPARED

12030954024