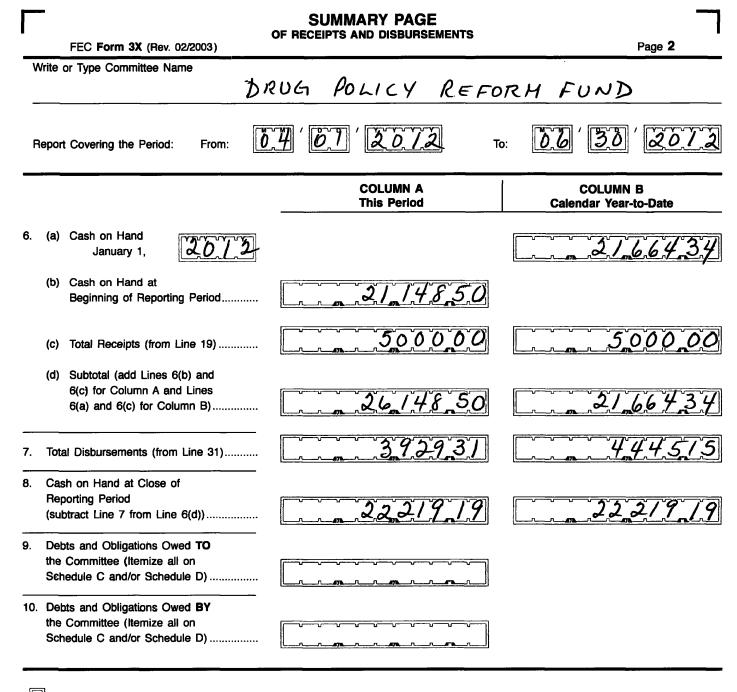
· d							·	
FEC FORM 3X	AN	PORT O D DISBL	JRSEI	MENTS	5	<i>.</i>	RECEI MAY - I I MAY - I I	PM 3:27
1. NAME OF COMMITTEE (in f		OR PRINT V		ample: If typing or the lines.	g, type	12FE4M5	ec mail c	ENTER
$[D_1R_1U_1G_1, P_1O_1]$	$L_1 L_1 C_1 Y_1 R$	EFORH	FUN		<u>   _      </u>		<u>.                                    </u>	
						<u>I. I. J. I. I</u>		
ADDRESS (number and	street)	BIL WEST	5,33,	$r_1d_1$ , ST	$R_1 E_1 E_1 T$			
Check if different than previous	rent	5, t, h, F, L	0,0,R					
than previous reported. (AC	$\vec{C}_{i}$ $N_{i}E$	$E_{\rm IN_1} V_1 O_1 R_1$	κ	<u></u>		NY L	0 00/-	
2. FEC IDENTIFICA	TION NUMBER	R ▼			S		ZIP COD	E 🔺
C 0 0 4 6	1236		8. IS THIS REPORT		ew I) <b>or</b>	X AMEI (A)	NDED	
4. TYPE OF REP (Choose One)	ORT (b)	Monthly Report	Feb 20 (M2) Mar 20 (M3)	• • •	lay 20 (M5) un 20 (M6)	Aug 20	(	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Repo	orts:	2 * • • • • •	Apr 20 (M4)	· · · · · · · · · · · · · · · · · · ·	ul 20 (M7)	Oct 20	(	(Non-Election Year Only) Jan 31 (YE)
July 15	Report (Q1) Report (Q2)	(c) 12-Day PRE-Election	1 ··· 	Primary (12P)	(	General (12	· ·	Runoff (12R)
October		Report for th	e: '	Convention (1	· ··-	Special (12		
January 3 Year-End	31 Report (YE)		lection on		·	n an	in the State of	
July 31 N Report (N Year Only	Non-election	(d) 30-Day POST-Election Report for the	··	General (30G	) : •	Runoff (30F	3) 5	Special (30S)
Termination (TER)	on Report		ection on	₩ /		<b></b>	in the State of	
5. Covering Period	°04 ′	01 20	12	through	ЪЪ	´3δ′	2012	
I certify that I have ex	amined this Ren	ort and to the he	st of my kno	wledge and h	oliof it is tru	e correct and c	omplete	
Type or Print Name of		•		4AVE2				
Signature of Treasurer	R	Gr -	u		D	ate 04	25	2013
NOTE: Submission of fa	alse, erroneous, o	or incomplete inform	nation may s	ubject the perse	on signing th	is Report to the	penalties of 2 U.	.S.C. §437g.
Office Use Only							FEC FOR	

13031064023

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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

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	- 0	DETAILED SUMMARY PAGE of Receipts	Г
	FEC Form 3X (Rev. 06/2004)		Page 3
W	rite or Type Committee Name		
	DRUG	h POLICY REFORM	FUND
R	eport Covering the Period: From:	4 '07 '2072 T	· 0213012012
	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	500000	60000
	(i) Itemized (use Schedule A)		
	(ii) Uniterpized		
	(ii) Uniternized (iii) TOTAL (add		
	Lines 11(a)(i) and (ii)		
	(b) Political Party Committees	L	L
	(c) Other Political Committees		
	(such as PACs) (d) Total Contributions (add Lines	L	[
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)	500000	500000
12.	Transfers From Affiliated/Other		
	Party Committees		
13.	All Loans Received		
	·		
	Loan Repayments Received		
15.	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16.	Refunds at Contributions Made		
	to Federal Candidates and Other		
	Political Committees		
17.	Other Federal Receipts		
40	(Dividends, Interest, etc.)		L_r_r_n_r_r_n_r_r_r_r_r_r_r_r_r_r_r_r_r_
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account		,
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfers (add 18(a) and 18(b))		
			╎──╎──╎──╎──/──┘└── <i>ਗ਼</i> ੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑੑ
40	Takel Descipts (odd bisse dd/d)		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	500000	500000
	12, 10, 14, 10, 10, 17, anu 10(0)) ₽		
<b>20</b> .	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)►	500000	5000000

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### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

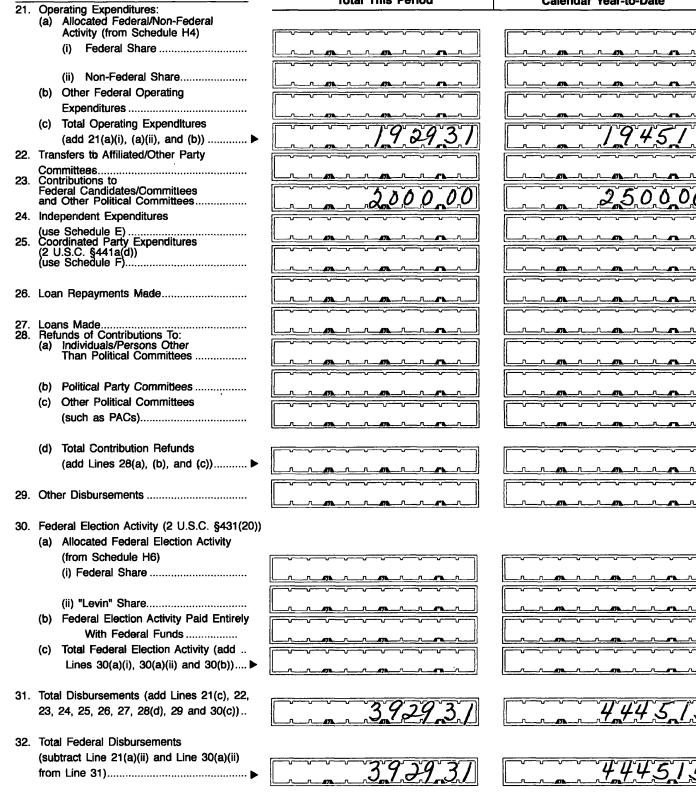
#### II. Disbursements

### COLUMN A **Total This Period**

**COLUMN B** 

Page 4

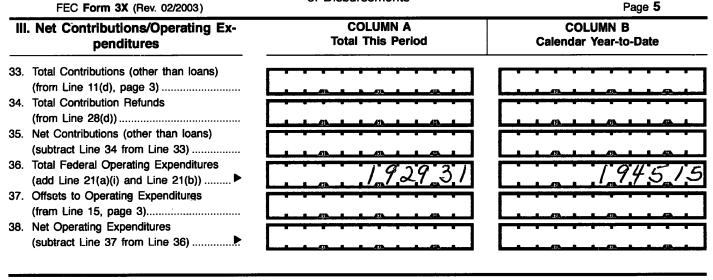
## **Calendar Year-to-Date**



# **DETAILED SUMMARY PAGE**

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of Disbursements



	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Surpmary Page	FOR LINE NUMBER: PAGE OF / (check only one)
	ny information copied from such Reports and Staten	person for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)	POLICY REFOR	
Full Name (Last, First, Middle Initial) A. HARVEY P.		ILP D.	
	Mailing Address 2400 OUTRIDE City CHAPEL HILL	ER TRACE State Zip Code NC 27510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		
	DKT INTERNATIONAL	cupation EXECUTIVE	
	Primary General Other (specify) ▼	gregate Year-to-Date ▼	Ø
В.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address	· · · · · · · · · · · · · · · · · · ·	
	City S	State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		
	Name of Employer Oc	cupation	
	Receipt For: Ag   Primary General   Othor (specity) ▼ Image: Control of the second se	gregate Year-to-Date ▼	
<u></u> с.	Full Name (Last, First, Middle Initial)		Date of Receipt
υ.	Mailing Address		
	City S	State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		
	Name of Employer Oc	cupation	
	Receipt For: Ag   Primary General   Other (specify) ▼	gregate Year-to-Date ▼	
	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	► <u>500000</u>
1	OTAL This Period (last page this line number only)		

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SCHEDULE B (FEC Form 3X)						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check o	nly one)			
	Detailed Summary Page	27		28b 28c 29 30b		
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME DF COMMITTEE (In Full)	-		<u>_</u>			
DRUG POLICY	REFORM	FUN	り			
Full Name (Last, First, Middle Initial)			Date of Dist	pursement		
FRIENDS OF JUAN	VAICGAS			0312212012		
A. FRIENDS OF JUAN Mailing Address 5429 MADISON	AVENUE		00			
City SACRAMENTO	CA Zip Code 95	841				
Purpose of Disbursement POLITICAL CONT	RIBUTION	DII	Amount of E	ach Disbursement this Period		
Candidate Name JUAN VAR		Category/ Type		1000000		
Office Sought: House Disbursen		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		راغیت پیدیکین است است وست ا		
President	Primary General Other (specify) ▼ 201	2				
State: CA District: 5154	~~~~	d				
B. ALAN LOWENTHAL F	FOR CONGRE	SS	Date of Dist	pursement		
Mailing Address 6380 WILS HILE B			- <b>[7</b> 5] ' [	13 22 2012		
City LOS ANGELES	CA Zip Code 900	48	-			
Purpose of Disbursement POLITICAL CONTRIBU				Amount of Each Disbursement this Period		
Candidate Name ALAN LOWENT?	t	Category/		1_0_0_0_0		
Office Sought: X House Disbursen		Туре				
	Primary General					
State: CA District: 47 <sup>n</sup>	Other (specify) ▼ 201	え				
Full Name (Last, First, Middle Initial)		ı.	Date of Dist	pursement		
·····				لمبغبينا العيوا		
Mailing Address						
City S	State Zip Code					
Purpose of Disbursement						
Candidate Name		Category/		ach Disbursement this Period		
Office Sought: House Disbursen	nent For:	Туре				
Senate	Primary General					
State: District:	Other (specify)	<u></u>				
SUBTOTAL of Disbursements This Page (optional)				200000		
TOTAL This Period (last page this line number only)				200000		
IVIAL THIS Fendu (last page this line number only)		••••••				

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SCHEDULE B (FEC Form 3X)					
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(ch		( only one)
		Detailed Summary Page			27 28a 28b 28c 29 30b
	y information copied from such Reports and Staten for commercial purposes, other than using the name				
Ν	NAME DF COMMITTEE (in Full)				
	DRUG POLICY	REFORM FUN	J D	)	
<u>د</u>	Full Name (Last, First, Middle Initial)		_		
Α.	DRUG POWCY ACTION				Date of Disbursement
		15th FLOOR State Zip Code			
	NEW YORK	NY 10001			
	Purpose of Disbursement ANNUAL ADMINISTRAT	TON FEE	Ő (	Ø,	Amount of Each Disbursement this Period
	Candidate Name		Cate		//0.0.0.00
	Office Sought: House Disbursen	nent For: Primary General			
	State: District:	Other (specify) <b>▼</b>			
в.	Full Name (Last, First, Middle Initial)				Date of Disbursement
υ.	DRUG POLICY ALLIA	NCE			
	131 W, 33th Street	et, 15th FLOOR			0.6 0.1 2.0.1.2
	City NEW YORK Purpose of Disbursement				
	SALARY + OVERHEAD			2.	Amount of Each Disbursement this Period
			Cate Ty		" <u> </u>
	Office Sought: House Disbursen Senate President	nent For: Primary General Other (specify)		•	
	State: District:				
с.	Full Name (Last, First, Middle Initial)				Date of Disbursement
	Mailing Address				
	City	State Zip Code			·····
	Purpose of Disbursement				
	Candidate Name		 Cate Tv	gory/	Amount of Each Distursement this Period
	Office Sought: House Disbursen	—	.,	•	
	Senate President	Primary General Other (specify) ▼			
	State: District:	(-p			
s	UBTOTAL of Disbursements This Page (optional)				· / 9.2931
т	OTAL This Period (last page this line number only)				• 192937

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### FEC Schedule B (Form 3X) Rev. 02/2003

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMI The FEC added this page to the end of this filing to indica	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation <sup>™</sup> or Signature Cor	nfirmation <sup>™</sup> Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify): fred, Eff	Shipping Date 4/3/17
Next Busin	ness 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
Date of Other (Specify):	f Receipt or Postmarked
Imp	5/1/13
PREPARER     (3/2005)	DATE PREPARED

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