FEC

REPORT OF RECEIPTS TO THE CENTER AND DISBURSEMENTS 2010 FEB - 1 AM 11: 29

FORM 3X For Other Than An Authorized Committee Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. [B,A,Y,C,A,R,E], P, H, Y, S, I, C, I, A, N, S,ADDRESS (number and street) Check if different than previously [G,R,E,E] $\mathbf{B}_{\mathbf{A}}\mathbf{A}_{\mathbf{A}}\mathbf{Y}_{\mathbf{A}}$ |W I <u>|</u> 5₁ 4₁ 3₁ 0₁ 3| reported. (ACC) FEC IDENTIFICATION NUMBER ▼ CITY A STATE A ZIP CODE 3. IS THIS NEW **AMENDED** 00407700 OR REPORT (N) (A) TYPE OF REPORT Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) Runoff (12R) 12-Day Primary (12P) General (12G) July 15 **PRE-Election** Quarterly Report (Q2) Special (12S) Report for the: Convention (12C) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** Runoff (30R) General (30G) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) State of Election on Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. CHRIS AUGUSTIAN Type or Print Name of Treasurer Date Signature of Treasurer 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 FEC FORM 3X Use Rev. 12/2004

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FE6AN026

Only

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	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
	rite or Type Committee Name BAYCARE PHYSICIANS PAC		
Re	eport Covering the Period: From:	57'611'2009	: [2] 'B1 'B009
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		8,427,68
	(b) Cash on Hand at Beginning of Reporting Period	7,42,494	
	(c) Total Receipts (from Line 19)	3,7.79.21	7.7.7.6.4.7
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11,204.15	[
7.	Total Disbursements (from Line 31)	1,39480	6,3,94,80
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	[7.807.35
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.0	
<u> </u>	This committee has qualified as a multic	candidate 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

FE6AN026

FEC Form 3X (Rev. 06/2004)

DETAILED SUMMARY PAGE of Receipts

Page 3

Write or Type Committee Name

Report Covering the Period: From: 67 01 2009 To: 12 31 2009				
	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	20051111	1130.00	
	(i) Itemized (use Schedule A)	2,605.44	<u>L. 7,580</u> 8a	
	(ii) Uniternized	117277	339565	
	(iii) TOTAL (add	The second secon	The state of the s	
	Lines 11(a)(i) and (ii)▶	3.77921	7.776.4.7	
			The state of the s	
	(b) Political Party Committees	.5,0	land of the second of the seco	
-	(c) Other Political Committees			
	(such as PACs)	.00		
	(d) Total Contributions (add Lines			
	11(a)(iii), (b), and (c)) (Carry	2779 21	777/47	
12	Totals to Line 33, page 5) Transfers From Affiliated/Other	Secret Consumer Street Consumer Secretary	The second secon	
12,	Party Committees	ΛΛ.	00	
			Marchania Marchania India	
13.	All Loans Received	00		
			Security Section 1. 10 - 1. April 1995	
14.	Loan Repayments Received	Ω	00	
	Offsets To Operating Expenditures	' · · · · · · · · · · · · · · · · · · ·	Secretaria (v. 1. v. v. v. v. 7. ani i mai seci.)	
	(Refunds, Rebates, etc.)	- Character and	and the state of t	
	(Carry Totals to Line 37, page 5)	, <u>O</u> O	.0.0	
16.	Refunds of Contributions Made		,	
	to Federal Candidates and Other	A 0:		
17	Political Committees Other Federal Receipts	<u> </u>		
.,.	(Dividends, Interest, etc.)	0.0	60	
18.	Transfers from Non-Federal and Levin Funds		in the state of th	
	(a) Non-Federal Account	Anna Santa Sarra de Calebrata d	tanan basadanan arang 18 melamatan alkarah sama	
	(from Schedule H3)	0.0	0.6	
		Samuel Control of the	Commence of the second	
	(b) Levin Funds (from Schedule H5)		00	
	(c) Total Transfers (add 18(a) and 18(b))	.D.O.	0.0	
		Challenger (A. C.		
10	Total Receipts (add Lines 11(d),		·	
١٣.	12, 13, 14, 15, 16, 17, and 18(c))▶	3,77.921	777/47	
		3, 6, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	legisted to the second	
20.	Total Federal Receipts	Searchide	Semether or its continued was the continued and the semental and the semen	
	(subtract Line 18(c) from Line 19)▶	3,77931	7.7.76.4.7	
		the second secon	and person of the Second distance of the Control of	

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills Period	Calendar Year-to-Date
	Activity (from Schedule H4)	691190	201100
	(i) Federal Share		
	(ii) Non-Federal Share	LO.O	0.0
	(b) Other Federal Operating		
	Expenditures	L	<u> </u>
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	89482	8.94.80
22.	Transfers to Affiliated/Other Party		
23.	Contributions to	<u></u>	
	Federal Candidates/Committees and Other Political Committees	5.0.0.0.0	<u></u>
	Independent Expenditures	00	0.0
25.	(use Schedule E)		
	(use Schedule F)		
26.	Loan Repayments Made		
27. 28	Loans MadeRefunds of Contributions To:	00	<u>0,0</u>
	(a) Individuals/Persons Other Than Political Committees	0.0	0.0
	(b) Political Party Committees		00
	(c) Other Political Committees		
	(such as PACs)	$[\underline{},\phantom$	
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements	O,O	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share		<u> </u>
	(ii) "Levin" Share	0.00	00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	00	00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1.39.48.0	639480
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	139480	639480

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period** Calendar Year-to-Date penditures 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)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE OF 5** Use separate schedule(s) (check only one) for each category of the **√**11a 11b 11c **Detailed Summary Page** 13 14 15 16 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) 15icians Full Name (Last, First, Middle Initial) A. Block Date of Receipt Mailing Address 2501 State Zip Code Amount of Each Receipt this Period Special control of the control of th FEC ID number of contributing C 8.06 federal political committee. 11/20/09 **20.83** Name of Employer Occupation 10122109 20.83 Baylare Receipt For: 9/22/09 20.83 Aggregate Year-to-Date ▼ General **Primary** 8/21/09 20.83 Other (specify) 7/22/09 20.83 Full Name (Last, First, Middle Initial) Date of Receipt B. Dervis Mailing Address State Zip Code Amount of Each Receipt this Period C FEC ID number of contributing 1,8,5,6 federal political committee. 11/20/09 19.15 Name of Employer Occupation 10/22/09 15.94 BayCare Receipt For: 9/22/09 20.14 General **Primary** 8/21/09 16.92 Other (specify) ▼ 7/22/09 13.90 Full Name (Last, First, Middle Initial) Date of Receipt 640 Mailing Address City Zip Code State Amount of Each Receipt this Period FEC ID number of contributing federal political committee. 11/20/09 Name of Employer Occupation 10/22/09 41.67 Sician 9/22/09 General Primary 8/21/09 50004 Other (specify) 7122109 SUBTOTAL of Receipts This Page (optional).....

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

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

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 2 OF 5 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12
Any information copied from such Reports and Statements m	ay not be sold or used by any pe	rson for the purpose of soliciting contributions
or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)	DI.	
Baykare Physicians Full Namy (Last, First, Middle Initial)	PAC	, , , , , , , , , , , , , , , , , , ,
A. Haller Kobert	·	Date of Receipt
Malling Address 2680 Hillside Heights	5	12 52 20.09
City State Green Bay WI	Zip Code SU3/1	Amount of Each Passist this Paried
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	s of manufacture (. march manufacture).	8.3.33
Name of Employer Occupation		11/20/09 83.33
P	ysician_	10 20109 83.33 120109 83.33
Primary General Aggregate	Year-to-Date ▼	
Other (specify) ▼	9.9.9.9.6	8/21/09 83.33 7/22/09 83.33
Full Name (Last, First, Middle Initial)		
B. Harrison Richard		Date of Receipt
Mailing Address 984 Highland Springs	ct.	12 22 20.09
Oneida WI	Zip Code 54/55	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		58.70
Name of Employer Occupation		11120109 41-19
Bucace Clinic 11P Neur	Burgeon	10/00/09 \$1.44
Recorpt For: Aggregate	Year-to-Date ▼	9122109 49.78
Primary General Other (specify) ▼	(22.40	8/21/09 36.63
· · · · · · · · · · · · · · · · · · ·	672,4,0	7/22/09 58.38
Full Name (Last, First, Middle Initial) C. Hennigan Shawn		Date of Receipt
Mailing Address 1994 Paint Horse Trail		177 22 2000
City State	Zip Code	7.0 00 100.011
De Pere WI	54115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		4271
Name of Employer Occupation	<u> </u>	11/20/09 20.83
BayCare Clinic LLP Phy	Sician	10/22/09 38.80
	Year-to-Date ▼	9/22/09 47.15
Primary General Other (specify) ▼	,718.00	8/21/09 57.38
- Lacardon de la company de la		7/22/09 62.06
SUBTOTAL of Receipts This Page (optional)		1.06.5.02
233.4.1.2.5. 1.000pto Tino i ago (optoriar)		

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or for commercial purposes, other than using the name a	ild address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Dura Dura	- D1-	'
BayCare Physicia	ns TRC	
Full Name (Last, First, Middle Initial)		
A Hodgdon Scott		Date of Receipt
Mailing Address		
3010 Great Oak Ln.		
	Zin Code	
Green Bay WI	- <u>>4311 </u>	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		7.7
tand to have		11/20/09 14.34
Name of Employer Occup	ation	
Buy Care Clinic LLP H	Nysician	10/22/09 25.35
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Aggree	gate Year-to-Date ▼	
	30874	18/21/09 23.57
Other (specify) ▼		
		7/22/19 32.76
Full Name (Last, First, Middle Initial)		• .
B. Hodgson Joseph	•	Date of Receipt
Mailing Address		
1809 S. Sunkist Cir.		1/2/22/2009
City State	Zip Code	
De Pere WI	•	
TE 19E W	- >911-2	Amount of Each Receipt this Period
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federal political committee.		40.6
		11/20/09 25.75
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BayCare Clinic LLP M	NSICIAN	10122109 26.33
Descint For	gate Year-to-Date ▼	79/22/09 27.35
Primary General		ماء الم
Other (specify) ▼	30494	8121109 25.69
		7/22/09 26.08
Full Name (Last, First, Middle Initial)		1102101 24.00
		Date of Receipt
c. Limoni Robert		
Mailing Address	- 1	MYM / D O / Y Y Y Y Y
3072 Bay settlement	<u>Cr.</u>	112 22 30.09
City State	— <u>•</u>	
Green Ball WI	<u> </u>	Amount of Each Receipt this Period
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federal political committee.		1850
record pontical communes.		
Name of Employer Occupa	ation	11/20/09 18.50
	VSician	10/22/09 18-50
Deceil For		7.01.001.01
Aggreg	gate Year-to-Date ▼	9/22/09 18.50
		8/21/09 18.50
Other (specify)	ろろろのか	10101101 60.00

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Other (specify) ▼

SCHEDULE A (FEC Form 3X)	Lies congrets ashertile/s)	FOR LINE NUMBER: PAGE 4 OF 5
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	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements ma	ny not be cold or used by any ner	
or for commercial purposes, other than using the name and a	ddress of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
BayKare Physician	PAC	
Full Name (Last, First, Middle Initial)		Date of Bessim
A. Ots Max Mailing Address		Date of Receipt
2455 SMILLEY Pd.		12 22 20.09
City State	Zip Code	A CONTRACTOR OF THE PARTY OF TH
De Pere WI	<u> 54115</u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25.00
_		11/20109 25.00
Name of Employer Occupation	Sicial	10/22/09 25.00
	Year-to-Date ▼	9/22/09 25.00
Primary General		8/21/09 25.00
Other (specify) ▼	3.0.0_0,0	1
Full Name (Last, First, Middle Initial)		7/22/09 25.00
B. Schnarbelt Michael		Date of Receipt
Mailing Address		
4318 Hilton Head Dr City State	Zip Code	L.a a.a a.0.0.9
Oneida WI	\$411S	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		10.06
Name of Employer Occupation		11/20/09 15.13
Boy Care Clinic LLP Phys	ician	10122/09 14.76
Receipt For:	Year-to-Date ▼	9/22/09 22.48
Primary General Other (specify) ▼	23.1.89	82169 13.90
	<u> </u>	7/22/09 27.71
Full Name (Last, First, Middle Initial)		
C. Socre 15 Christopher Mailing Address	<u> </u>	Date of Receipt
3317 Star Creek Ct.		12 22 2009
City State	Zip Code	
Green Bay WI	<u> 54311 </u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		20.00
Company and the company and th	de e almos seminarios de contracto de contra	11/26/09 20.00
Name of Employer Occupation	1756-	
Receipt For: Aggregate	al voctor	0/22/09 20,00
Primary General Aggregate	Year-to-Date ▼	9/22/09 20.00 8/21/09 20.00
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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 5 (check only one)
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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Fuil)	·	
BayKare Physic	cians PAC	
Full Name (Last, First, Middle Initial) A. Weinshel Steven		Date of Receipt
Malling Address 1746 Martin Wood	ct.	12 / 22 / 2009
City De Pere	State Zip Code WI S4115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4.1.6.7
Name of Employer	Occupation	11/20/09 41.67
Barkare Clinic LLP	Physician	10/22/09 41.67
Receipt For: Primary General	Aggregate Yéar-to-Date ▼	9/22/09 41.67
Other (specify)	50004	8/2/109 41.67
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Name of Employer	Occupation	
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Full Name (Last, First, Middle Initial) C.		Date of Receipt
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City	State Zip Code	Account of Coll Devices Advisory
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.		
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	77.7	
		Constitution of Santal manufactures and sent frame fra
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SCHEDULE B (FEC FORM 3X)	Lies congrato schodulo/s)	FOR LINE NUMBER	R: PAGE / OF, /
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)	☐ 23 ☐ 24 ☐ 25 ☐ 26
	Detailed Summary Page	27 28a	
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or for commercial purposes, other than using the nam NAME OF COMMITTEE (in Full)	and address of any political	SOMETICE TO SOUCH C	onalisations from Such Committee.
- ' ' =	in DA		
Full Name/(Last, First, Middle Initial)	uuns M		
A		Date	of Disbursement
Mailing Address	2)7		7 00 00
Po Box 10033			
City	tate Zip Code		
Purpose of Disbursement	VI 54307		
Contribution Candidate Name		Amou	nt of Each Disbursement this Period
Candidate Name Marc Trager		Category/ Type	50000
Office Sought: House Disbursem	<u></u> .	Hearth.	
	Primary ∑ General Other (specify) ▼		•
State: WI District: 8	ouror (apecity) ▼		
Full Name (Last, First, Middle Initial)			
В.			of Disbursement
Mailing Address			, Lang, Landara
City S	tate Zip Code		
Purpose of Disbursement			
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Candidate Name		Category/	
Office Sought: House Disbursem			
	Primary ☐ General Other (specify) ▼		
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Full Name (Last, First, Middle Initial)			
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SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)	<u>L</u> .		

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE		<i>(</i>)F	1	
FOR	LINE	21a	OF	FORM	3)

N/	NAME OF COMMITTEE (In Full)				
	Bay Care Physicians PAC				
<u></u>	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:		
	Full Name (Last, First, Middle Initial) Bay Core Health Systems		Administrative Fundraising Exempt		
	Mailing Address				
	164 N. Broadway		Voter Drive Direct Candidate Support		
	City State Zip Code		Public Comm (ref to party only) by PAC		
	Green Bay WI \$430) Purpose of Disbursement:		Allocated Activity or Event Year-To-Date		
	Pental Agreement	001	8,9,4,8,0		
	Activity or Event Identifier: /	Catagony	יראיירייאין / ווייישין / ווייישין		
		Category/ Type	Date [2] 3.1 2.0.09		
	FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT		
	89480	0,0	89480		
В.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:		
			Administrative Fundraising Exempt		
	Mailing Address		☐ Voter Drive ☐ Direct Candidate Support		
	City State Zip Code		Public Comm (ref to party only) by PAC		
	Purpose of Disbursement:		Allocated Activity or Event Year-To-Date		
	Activity or Event Identifier:	Catagony	[M_1_M] \ [LB_1_B] \ [.A_1_A_1_A_1]		
		Category/ Type	Date		
	FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT		
		, , , , , , , , , , , , , , , , , , ,			
<u>c.</u>	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:		
U.	ruii Name (Lasi, Filsi, Middle inida)				
	Mailing Address	·	Administrative Fundraising Exempt		
			Voter Drive Direct Candidate Support		
	City State Zip Code		Public Comm (ref to party only) by PAC		
	Purpose of Dishursoment		Allocated Activity or Event Year-To-Date		
	Purpose of Disbursement:				
	Activity or Event Identifier:		<u> </u>		
	}	Category/ Type	Date		
	FEDERAL SHARE + NONFEDERAL	L SHARE	= TOTAL AMOUNT		
			المستحصم		
		<u> </u>			
SI	JBTOTAL of Allocated Federal and NonFederal Activity This Page				
	FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT				
	89480 00 89480				
TC	TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))				
	FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT				
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