

A. Form/Schedule : **F3XN**

Transaction ID :

On Thursday 8/11/2011 the FEC File software reported an error that the dcf file was corrupt and caused the system to crash preventing uploading of the report. Due to the time difference we were not able to contact FEC tech support regarding the issue. All other programs on the computer worked following the error message except FEC File. Our computer technician worked on the system on Friday 8/12/2011 Saturday 8/13/2011 and determined that a possible incompatibility between FEC file and a Microsoft update caused the problem and restored the computer to a date previous to the update. This error prevented us from uploading the report until Sunday 8/14/2011.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
WESTERN REPRESENTATION PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

	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>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		39461.54
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	21783.43									
(c) Total Receipts (from Line 19)	23705.00	151467.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45488.43	190928.61								
7. Total Disbursements (from Line 31)	25078.74	170518.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20409.69	20409.69								
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)	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
WESTERN REPRESENTATION PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

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)	3469.00	26544.00
(ii) Unitemized	20236.00	124923.07
(iii) TOTAL (add Lines 11(a)(i) and (ii)	23705.00	151467.07
(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)	23705.00	151467.07
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	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))	23705.00	151467.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23705.00	151467.07

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.....	20753.39	160813.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	20753.39	160813.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	4325.35	4825.35
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	4879.94
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))..	25078.74	170518.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25078.74	170518.92

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)	23705.00	151467.07
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23705.00	151467.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20753.39	160813.63
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20753.39	160813.63

**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 7 / 35
	<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

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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Patricia A Ainley	Date of Receipt MM / DD / YYYY 07 / 13 / 2011
	Mailing Address 6020 Melvin Ave	Transaction ID: SA11AI.27773
	City Tarzana State CA Zip Code 91356	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer A & M Management LLC Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 225.00	

B.	Full Name (Last, First, Middle Initial) Glenn Ashworth	Date of Receipt MM / DD / YYYY 07 / 01 / 2011
	Mailing Address 34 rogers location dr	Transaction ID: SA11AI.28164
	City Jackson State NH Zip Code 03846	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer retired Occupation retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) Glenn Ashworth	Date of Receipt MM / DD / YYYY 07 / 12 / 2011
	Mailing Address 34 rogers location dr	Transaction ID: SA11AI.28051
	City Jackson State NH Zip Code 03846	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer retired Occupation retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	125.00
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 / 35
(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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) mary l benson		Date of Receipt MM / DD / YYYY 07 / 22 / 2011		
	Mailing Address 321 cameron place #10		Transaction ID: SA11AI.27929		
	City glendale	State CA	Zip Code 91207	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer walt disney imagineering	Occupation engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

B.	Full Name (Last, First, Middle Initial) Thomas K Black		Date of Receipt MM / DD / YYYY 07 / 08 / 2011		
	Mailing Address 505 McIntosh		Transaction ID: SA11AI.27433		
	City shreveport	State LA	Zip Code 71115	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer thomas k black cpa	Occupation cpa			
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) Penny Bonadonna		Date of Receipt MM / DD / YYYY 07 / 11 / 2011		
	Mailing Address 12 Ramblewood Rd		Transaction ID: SA11AI.27715		
	City Shoreham	State NY	Zip Code 11786	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer St. Luke's Lutheran Church	Occupation Office Administrator			
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)	▶	150.00
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 9 / 35
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Penny Bonadonna		Date of Receipt MM / DD / YYYY 07 / 16 / 2011		
	Mailing Address 12 Ramblewood Rd		Transaction ID: SA11AI.27828		
	City Shoreham	State NY	Zip Code 11786	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer St. Luke's Lutheran Church	Occupation Office Administrator	Aggregate Year-to-Date 235.00		

B.	Full Name (Last, First, Middle Initial) Ronald W Buckalew		Date of Receipt MM / DD / YYYY 07 / 15 / 2011		
	Mailing Address 907 Amherst Drive		Transaction ID: SA11AI.27787		
	City Charleston	State WV	Zip Code 25302	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Spencer Presbyterian Church	Occupation Minister	Aggregate Year-to-Date 220.00		

C.	Full Name (Last, First, Middle Initial) Jack A Buzbee		Date of Receipt MM / DD / YYYY 07 / 25 / 2011		
	Mailing Address 200 E Douglas St		Transaction ID: SA11AI.27940		
	City De Soto	State IL	Zip Code 62924	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer none	Occupation retired	Aggregate Year-to-Date 760.00		

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 10 / 35
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Ralph H Clinard	Date of Receipt MM / DD / YYYY 07 / 01 / 2011
	Mailing Address 3306Chartreuse Way	Transaction ID: SA11AI.27154
	City State Zip Code Houston TX 77082	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00	

B.	Full Name (Last, First, Middle Initial) Ralph H Clinard	Date of Receipt MM / DD / YYYY 07 / 13 / 2011
	Mailing Address 3306Chartreuse Way	Transaction ID: SA11AI.27767
	City State Zip Code Houston TX 77082	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Ralph H Clinard	Date of Receipt MM / DD / YYYY 07 / 16 / 2011
	Mailing Address 3306Chartreuse Way	Transaction ID: SA11AI.27802
	City State Zip Code Houston TX 77082	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	75.00
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 11 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Ralph H Clinard

Mailing Address 3306Chartreuse Way

City State Zip Code
Houston TX 77082

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2011

Transaction ID: SA11AI.28309

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Thomas Crabtree

Mailing Address 7859 Twin Ridge Drive

City State Zip Code
Glen Burnie MD 21061

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

Name of Employer best efforts Occupation best efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2011

Transaction ID: SA11AI.28052

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
john m destefano

Mailing Address 201 kentford ct`

City State Zip Code
warrington PA 18976

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

Name of Employer none Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 02 / 2011

Transaction ID: SA11AI.27165

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 12 / 35
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Stewart Engelman

Mailing Address 9 Cranwell Avenue

City State Zip Code
South Burlington VT 05403

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

Name of Employer Occupation
Champlain Micro Systems Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2011

Transaction ID: SA11AI.27864

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Thane Farmer

Mailing Address 11197 Weatherstone Drive

City State Zip Code
Waynesboro PA 17268

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2011

Transaction ID: SA11AI.27159

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Thane Farmer

Mailing Address 11197 Weatherstone Drive

City State Zip Code
Waynesboro PA 17268

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2011

Transaction ID: SA11AI.27168

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 / 35

(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Thane Farmer

Mailing Address 11197 Weatherstone Drive

City State Zip Code
Waynesboro PA 17268

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2011

Transaction ID: SA11AI.27244

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Thane Farmer

Mailing Address 11197 Weatherstone Drive

City State Zip Code
Waynesboro PA 17268

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

Name of Employer Occupation
None Retired

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

Date of Receipt

M M / D D / Y Y Y Y
07 / 29 / 2011

Transaction ID: SA11AI.27958

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Hartson D Fillmore

Mailing Address 2712 Manorwood Trail

City State Zip Code
Fort Worth TX 76109

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2011

Transaction ID: SA11AI.27272

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

520.00

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 / 35
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Herrmann Glockler

Mailing Address 3265 Sierra Crest Way

City State Zip Code
Reno NV 89519

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

Name of Employer Retired Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 04 / 2011

Transaction ID: SA11AI.27171

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Marcus Griffis

Mailing Address 56 River Park Ct

City State Zip Code
Newnan GA 30265

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

Name of Employer Day & Zimmermann Occupation Site Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2011

Transaction ID: SA11AI.27213

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
James c Hamp

Mailing Address 12150 Washington Center Pkwy

City State Zip Code
Thornton CO 80241

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

Name of Employer Oracle USA Occupation Support Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2011

Transaction ID: SA11AI.27225

Amount of Each Receipt this Period
100.00

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 15 / 35
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
steven s herrick

Mailing Address 684 margarita ave

City State Zip Code
coronado CA 92118

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

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2011

Transaction ID: SA11AI.27485

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Lee Holmes

Mailing Address 530 W. O'Brien Dr.

City State Zip Code
Hagatna GU 96910

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

Name of Employer Occupation
SOUTHERN MEDIA, INC. manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1299.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2011

Transaction ID: SA11AI.27527

Amount of Each Receipt this Period
199.00

C.

Full Name (Last, First, Middle Initial)
Paul Hudgens

Mailing Address 5275 Sunset Drive

City State Zip Code
Littleton CO 80123

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

Name of Employer Occupation
Schlumberger Engineering Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2011

Transaction ID: SA11AI.27653

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **349.00**

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 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Belinda L Hylinski

Mailing Address 3137 Oakwood Lane

City Alamo State CA Zip Code 94507

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 11 / 2011
Transaction ID: SA11AI.27687
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Roger Kucway

Mailing Address 5954 walnut springs

City sylvania State OH Zip Code 43560

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

Name of Employer TRO inc Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 08 / 2011
Transaction ID: SA11AI.27425
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Roger Kucway

Mailing Address 5954 walnut springs

City sylvania State OH Zip Code 43560

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

Name of Employer TRO inc Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 28 / 2011
Transaction ID: SA11AI.27956
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 360.00

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 17 / 35
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
FRANK MASEK

Mailing Address 23478 Sandstone St.

City Mission Viejo State CA Zip Code 92692

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

Name of Employer Masek Consulting Service Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 07 / 08 / 2011
Transaction ID: SA11AI.28111
 Amount of Each Receipt this Period: 300.00

B.

Full Name (Last, First, Middle Initial)
FRANK MASEK

Mailing Address 23478 Sandstone St.

City Mission Viejo State CA Zip Code 92692

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

Name of Employer Masek Consulting Service Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 11 / 2011
Transaction ID: SA11AI.28058
 Amount of Each Receipt this Period: 200.00

C.

Full Name (Last, First, Middle Initial)
Andrew Nowak

Mailing Address 24220 SW Petes Mountain Rd.

City West Linn State OR Zip Code 97068

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

Name of Employer St. George's Caye Resort Occupation Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 19 / 2011
Transaction ID: SA11AI.28007
 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 18 / 35
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Beverly Rasmussen

Mailing Address 209 Woodland Ct

City State Zip Code
Brookings OR 97415

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

Name of Employer NA Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2011

Transaction ID: SA11AI.27482

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
judy shallenberger

Mailing Address box 617

City State Zip Code
genoa NV 89411

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

Name of Employer Nevada Center Occupation administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2011

Transaction ID: SA11AI.28166

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Allen Simon

Mailing Address 1383 N Criss St

City State Zip Code
Chandler AZ 85226

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2150.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2011

Transaction ID: SA11AI.27865

Amount of Each Receipt this Period
0.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 19 / 35
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Lucia Uihlein

Mailing Address 715 Lands End Drive

City State Zip Code
Longboat Key FL 34228

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

Name of Employer None Occupation homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2011

Transaction ID: SA11AI.27718

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Sharon Waite

Mailing Address 8301 w Business HWY 83

City State Zip Code
Mission TX 78572

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

Name of Employer self employed Occupation Agriculture

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 08 / 2011

Transaction ID: SA11AI.27462

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
EARL L WHETSTONE

Mailing Address 422-11 CAMILLE CIR

City State Zip Code
SAN JOSE CA 95134

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 21 / 2011

Transaction ID: SA11AI.27886

Amount of Each Receipt this Period
50.00

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 20 / 35
(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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) ronald n wong		Date of Receipt																					
	Mailing Address 355 campus drive suite b		<table border="1"> <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>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7		0	7		2	0	1	1														
	City	State	Zip Code	Transaction ID: SA11AI.27398																				
	hanford	CA	93230																					
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period																					
			250.00																					
Name of Employer self		Occupation physiian																						
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)	▶	250.00
TOTAL This Period (last page this line number only)	▶	3469.00

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

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)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial) DB Capitol Strategies PLLC <hr/> Mailing Address PO BOX 75021 <hr/> City Washington State DC Zip Code 20013 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.28209 Date of Disbursement MM / DD / YYYY 07 / 14 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Fundly Inc <hr/> Mailing Address 70 Broadway St. <hr/> City Westford State MA Zip Code 01886 <hr/> Purpose of Disbursement Online contribution processing fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.28222 Date of Disbursement MM / DD / YYYY 07 / 19 / 2011
	Amount of Each Disbursement this Period 713.40
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Fundly Inc <hr/> Mailing Address 70 Broadway St. <hr/> City Westford State MA Zip Code 01886 <hr/> Purpose of Disbursement Online contribution processing fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.28221 Date of Disbursement MM / DD / YYYY 07 / 31 / 2011
	Amount of Each Disbursement this Period 162.82
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1876.22

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 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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Hotels.com	Transaction ID: SB21B.28190 Date of Disbursement
	Mailing Address 10440 N. Central Expwy., Ste. 400	<input type="text" value="07"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Dallas State TX Zip Code 75231	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expenses Candidate Name	<input type="text" value="225.70"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="002"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Innovative Networks Inc	Transaction ID: SB21B.28193 Date of Disbursement
	Mailing Address 1811 Newman Pl	<input type="text" value="07"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Carson City State NV Zip Code 89703	Amount of Each Disbursement this Period
	Purpose of Disbursement Website development, Email service Candidate Name	<input type="text" value="2900.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Legato Inn	Transaction ID: SB21B.28212 Date of Disbursement
	Mailing Address 1800 S Santan Village Pkwy	<input type="text" value="07"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Gilbert State AZ Zip Code 85295	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expenses Candidate Name	<input type="text" value="200.74"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="002"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3326.44"/>
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 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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) PayPal Mailing Address 2211 N. First Street City San Jose State CA Zip Code 95131 Purpose of Disbursement Donation processing fee 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) ▼	Transaction ID: SB21B.28220 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 1 1	Amount of Each Disbursement this Period 138.52
B.	Full Name (Last, First, Middle Initial) Precision Campaigns Mailing Address PO Box 147 City Sacramento State CA Zip Code 95812 Purpose of Disbursement Consulting fee 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) ▼	Transaction ID: SB21B.28216 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 1	Amount of Each Disbursement this Period 1152.16
C.	Full Name (Last, First, Middle Initial) RedWeb Campaigns Mailing Address 1152 49th St City Sacramento State CA Zip Code 95819 Purpose of Disbursement Web hosting fee 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) ▼	Transaction ID: SB21B.28199 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 1 1	Amount of Each Disbursement this Period 300.00

SUBTOTAL of Disbursements This Page (optional)	1590.68
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 24 / 35

<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.28218 Date of Disbursement
	Mailing Address P.O. Box 36647 - 1CR	<input type="text" value="07"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expenses	<input type="text" value="542.40"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	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) Southwest Airlines	Transaction ID: SB21B.28189 Date of Disbursement
	Mailing Address P.O. Box 36647 - 1CR	<input type="text" value="07"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expenses	<input type="text" value="421.00"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	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) The Mathews Group	Transaction ID: SB21B.28203 Date of Disbursement
	Mailing Address 4856 E Baseline Rd #104	<input type="text" value="07"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Mesa State AZ Zip Code 85206	Amount of Each Disbursement this Period
	Purpose of Disbursement Office rental	<input type="text" value="800.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1763.40"/>
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 25 / 35

<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Tristate Odyssey	Transaction ID: SB21B.28217 Date of Disbursement
	Mailing Address 1817 N Stewart St	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Carson City State NV Zip Code 89706	Amount of Each Disbursement this Period
	Purpose of Disbursement Staffing services Candidate Name	<input type="text" value="7380.34"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type
B.	Full Name (Last, First, Middle Initial) Tristate Odyssey	Transaction ID: SB21B.28201 Date of Disbursement
	Mailing Address 1817 N Stewart St	<input type="text" value="07"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Carson City State NV Zip Code 89706	Amount of Each Disbursement this Period
	Purpose of Disbursement Staffing Services Candidate Name	<input type="text" value="4735.33"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Action Solutions

Mailing Address
6855 NE Arnold Ave

City Adair Village	State OR	Zip Code 97300
-----------------------	-------------	-------------------

Purpose of Expenditure GOTV Message	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
CRAIG HUEY

Calendar Year-To-Date Per Election for Office Sought	425.35
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Date
M M / D D / Y Y Y Y
0 7 / 1 1 / 2 0 1 1

Amount
425.35

Transaction ID: SE.27084

Office Sought: House State: CA
 Senate District: 36
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special-General
2011

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Mailing Address
1601 South California Avenue

City Palo Alto	State CA	Zip Code 94304
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Purpose of Expenditure Facebook Ad	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Calendar Year-To-Date Per Election for Office Sought	550.00
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Date
M M / D D / Y Y Y Y
0 7 / 1 1 / 2 0 1 1

Amount
50.00

Transaction ID: SE.28214

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2012

(a) SUBTOTAL of Itemized Independent Expenditures	475.35
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 1 2 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28215
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Facebook Ad 004

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
600.00

Disbursement For: Primary General
 Other (specify) : _____
2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28211
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Facebook Ad 004

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
650.00

Disbursement For: Primary General
 Other (specify) : _____
2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Mailing Address
1601 South California Avenue

City Palo Alto	State CA	Zip Code 94304
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Purpose of Expenditure Facebook Ad	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Calendar Year-To-Date Per Election for Office Sought	700.00
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Date
M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 1 1

Amount
50.00

Transaction ID: SE.28210

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Mailing Address
1601 South California Avenue

City Palo Alto	State CA	Zip Code 94304
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Purpose of Expenditure Facebook Ad	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Calendar Year-To-Date Per Election for Office Sought	750.00
---	--------

Date
M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 1 1

Amount
50.00

Transaction ID: SE.28206

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton _____ Date M M / D D / Y Y Y Y
 Signature 0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Mailing Address
1601 South California Avenue

City Palo Alto	State CA	Zip Code 94304
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Purpose of Expenditure Facebook Ad	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Calendar Year-To-Date Per Election for Office Sought	800.00
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Date
M M / D D / Y Y Y Y
0 7 / 1 8 / 2 0 1 1

Amount
50.00

Transaction ID: SE.28204

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Mailing Address
1601 South California Avenue

City Palo Alto	State CA	Zip Code 94304
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Purpose of Expenditure Facebook Ad	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Calendar Year-To-Date Per Election for Office Sought	850.00
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Date
M M / D D / Y Y Y Y
0 7 / 1 8 / 2 0 1 1

Amount
50.00

Transaction ID: SE.28205

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER ▼ C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date

M M 0 7	D D 1 8	Y Y Y Y 2 0 1 1
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Mailing Address
1601 South California Avenue

Amount

50.00

City Palo Alto	State CA	Zip Code 94304
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Transaction ID: SE.28207

Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Facebook Ad	Category/ Type 004
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Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Disbursement For: Primary General
 Other (specify) : _____
 2012

Calendar Year-To-Date Per Election for Office Sought	900.00
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Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date

M M 0 7	D D 1 9	Y Y Y Y 2 0 1 1
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Mailing Address
1601 South California Avenue

Amount

50.00

City Palo Alto	State CA	Zip Code 94304
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Transaction ID: SE.28202

Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Facebook Ad	Category/ Type 004
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Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Disbursement For: Primary General
 Other (specify) : _____
 2012

Calendar Year-To-Date Per Election for Office Sought	950.00
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(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date

M M 0 8	D D 1 4	Y Y Y Y 2 0 1 1
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28200
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Facebook Ad 004

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1000.00

Disbursement For: Primary General
 Other (specify) : _____
2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28197
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Facebook Ad 004

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1050.00

Disbursement For: Primary General
 Other (specify) : _____
2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28196

Purpose of Expenditure Category/Type
Facebook Ad 004

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1100.00

Disbursement For: Primary General
 Other (specify) : _____
2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 5 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28194

Purpose of Expenditure Category/Type
Facebook Ad 004

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1150.00

Disbursement For: Primary General
 Other (specify) : _____
2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 5 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28195

Purpose of Expenditure Category/Type
Facebook Ad 004

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1200.00

Disbursement For: Primary General
 Other (specify) : _____
2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28191

Purpose of Expenditure Category/Type
Facebook Ad 004

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1250.00

Disbursement For: Primary General
 Other (specify) : _____
2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28192

Purpose of Expenditure Category/Type
Facebook Ad 004

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1300.00

Disbursement For: Primary General
 Other (specify) : _____
2012

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Date
M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 1 1

Mailing Address
1601 South California Avenue

Amount
50.00

City State Zip Code
Palo Alto CA 94304

Transaction ID: SE.28188

Purpose of Expenditure Category/Type
Facebook Ad 004

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1350.00

Disbursement For: Primary General
 Other (specify) : _____
2012

(a) SUBTOTAL of Itemized Independent Expenditures	100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

Date M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 1

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook

Mailing Address
1601 South California Avenue

City State Zip Code
Palo Alto CA 94304

Purpose of Expenditure Category/Type
Facebook Ad 004

Name of Federal Candidate supported or Opposed by expenditure:
MITT ROMNEY

Calendar Year-To-Date Per Election for Office Sought
1400.00

Date
07 / 29 / 2011

Amount
50.00

Transaction ID: SE.28187

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2012

Full Name (Last, First, Middle, Initial) of Payee
Glengary

Mailing Address
4856 E Baseline Rd #104

City State Zip Code
Mesa AZ 85206

Purpose of Expenditure Category/Type
Support Email 004

Name of Federal Candidate supported or Opposed by expenditure:
CRAIG HUEY

Calendar Year-To-Date Per Election for Office Sought
3000.00

Date
07 / 11 / 2011

Amount
3000.00

Transaction ID: SE.27075

Office Sought: House State: CA
 Senate District: 36
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Runoff
2011

(a) SUBTOTAL of Itemized Independent Expenditures	3050.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4325.35

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature
Date 08 / 14 / 2011