



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**JOHN S FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="40395.95"/>	<input type="text" value="40395.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="45539.32"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="18750"/>	<input type="text" value="179500"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="64289.32"/>	<input type="text" value="219895.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="49746.77"/>	<input type="text" value="205353.4"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14542.55"/>	<input type="text" value="14542.55"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**JOHN S FUND**

Report Covering the Period: From:  /  /  To:  /  /

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).....	750	8500
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	750	8500
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	18000	166000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18750	174500
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	5000
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	18750	179500
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18750	179500

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	19746.77	71853.4
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	19746.77	71853.4
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000	123500
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	10000	10000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	49746.77	205353.4
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49746.77	205353.4

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18750	174500
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18750	174500
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	19746.77	71853.4
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	5000
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19746.77	66853.4

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Small PAC work done at home.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**JOHN S FUND**

**A. John Shelk**  
Full Name (Last, First, Middle Initial)

Mailing Address 4845 Yorktown Boulevard

City State Zip Code  
Arlington VA 22207-2737

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

Name of Employer Occupation  
American Gaming Board Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500

Date of Receipt  
10 / 05 / 2012  
Transaction ID : SA11AI-35-1490-c

Amount of Each Receipt this Period  
500

Contribution

**B. Timothy Kurth**  
Full Name (Last, First, Middle Initial)

Mailing Address 1217 Warrington Place

City State Zip Code  
Alexandria VA 22307-2053

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

Name of Employer Occupation  
Heartland Strategies Govt Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250

Date of Receipt  
10 / 03 / 2012  
Transaction ID : SA11AI-692-1471-c

Amount of Each Receipt this Period  
250

Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	750.00

**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 8 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)  
**A. American Optometric Association Political Action Committee**

Mailing Address 1505 Prince Street  
Suite 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11C-571-1473-c**

Amount of Each Receipt this Period  
2500

Contribution

Full Name (Last, First, Middle Initial)  
**B. Bluepac - Blue Cross Blue Shield Association Pac**

Mailing Address 1310 G Street NW

City Washington State DC Zip Code 20005-3000

FEC ID number of contributing federal political committee. **C C00194746**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
10 / 05 / 2012  
**Transaction ID : SA11C-873-1489-c**

Amount of Each Receipt this Period  
2500

Contribution

Full Name (Last, First, Middle Initial)  
**C. Dykema Gossett Federal Pac**

Mailing Address 201 Townsend Street  
Suite 900

City Lansing State MI Zip Code 48933-1529

FEC ID number of contributing federal political committee. **C C00342113**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000

Date of Receipt  
10 / 05 / 2012  
**Transaction ID : SA11C-1038-1492-c**

Amount of Each Receipt this Period  
2000

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)  
**A. EPSA PAC**

Mailing Address 1401 New York Avenue NW  
Floor 11

City Washington State DC Zip Code 20005-2102

FEC ID number of contributing federal political committee. **C** C00326009

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500

Date of Receipt  
10 / 05 / 2012  
**Transaction ID : SA11C-339-1491-c**

Amount of Each Receipt this Period  
1500

Contribution

Full Name (Last, First, Middle Initial)  
**B. MidAmerican Energy Company Executive PAC**

Mailing Address 666 Grand Avenue  
# 657

City Des Moines State IA Zip Code 50309-2506

FEC ID number of contributing federal political committee. **C** C00324483

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000

Date of Receipt  
10 / 08 / 2012  
**Transaction ID : SA11C-155-1475-c**

Amount of Each Receipt this Period  
2000

Contribution

Full Name (Last, First, Middle Initial)  
**C. Takeda Pharmaceuticals America Inc. Political Action Committee**

Mailing Address 1 Takeda Parkway

City Deerfield State IL Zip Code 60015-5713

FEC ID number of contributing federal political committee. **C** C00441733

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11C-930-1474-c**

Amount of Each Receipt this Period  
2500

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 16  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**JOHN S FUND**

**A. Trans Pac**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 365

City McLean State VA Zip Code 22101-0365

FEC ID number of contributing federal political committee. **C** C00420661

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000

Date of Receipt: 10 / 03 / 2012  
**Transaction ID : SA11C-1035-1472-c**

Amount of Each Receipt this Period: 5000

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	18000.00

**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

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NAME OF COMMITTEE (In Full)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)

**A. Solage Calistoga Hotel**

Mailing Address 755 Silverado Trail

City Calistoga State CA Zip Code 94515-1100

Purpose of Disbursement  
Catering and Expenses for PAC Fundraiser

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2012			

**Transaction ID : SB21B-905-110-V**

Amount of Each Disbursement this Period

7678.77
---------

**[MEMO ITEM]**

Subitemization of Gula Graham Group ( 10/02/12 )

Full Name (Last, First, Middle Initial)

**B. Gula Graham Group**

Mailing Address 700 12th Street NW  
Suite 700

City Washington State DC Zip Code 20005-4052

Purpose of Disbursement  
Fundraising: PAC Fundraising Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2012			

**Transaction ID : SB21B-761-1478-e**

Amount of Each Disbursement this Period

7678.77
---------

Full Name (Last, First, Middle Initial)

**C. Gula Graham Group**

Mailing Address 700 12th Street NW  
Suite 700

City Washington State DC Zip Code 20005-4052

Purpose of Disbursement  
Fundraising: PAC Fundraising Commission

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2012			

**Transaction ID : SB21B-761-1486-e**

Amount of Each Disbursement this Period

11840
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

19518.77
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**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)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)

**A. MB Maxwell Consulting Inc.**

Mailing Address 5 Stonehill Court

City State Zip Code  
Edwardsville IL 62025-6764

Purpose of Disbursement  
Retainer for PAC finances and reporting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-696-1477-e**

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)

**A. Bass Victory Committee**

Mailing Address PO Box 3451

City Concord State NH Zip Code 03302-3451

Purpose of Disbursement  
Political Contribution: Contribution

011

Candidate Name

**Charles F. Bass**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NH District: 02

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB23-785-1482-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**B. Benishek For Congress**

Mailing Address 802 Pentoga Trail

City Crystal Falls State MI Zip Code 49920-8518

Purpose of Disbursement  
Political Contribution: Contribution

011

Candidate Name

**Daniel J Benishek**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB23-776-1483-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**C. Brian Bilbray for Congress**

Mailing Address PO Box 455

City Rancho Santa Fe State CA Zip Code 92067-0455

Purpose of Disbursement  
Political Contribution: Contribution

011

Candidate Name

**Brian Bilbray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 50

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB23-271-1481-e**

Amount of Each Disbursement this Period

1000

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)

## A. Danny Tarkanian For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2012

Mailing Address 50 S Jones Boulevard  
Suite 202

City Las Vegas State NV Zip Code 89107-2680

Transaction ID : SB23-1000-1485-e

Purpose of Disbursement  
Political Contribution: Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Danny Tarkanian**

Category/  
Type

1000
------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NV District: 04

Full Name (Last, First, Middle Initial)

## B. Freedom Pac

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2012

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

Transaction ID : SB23-875-1479-e

Purpose of Disbursement  
Political Contribution: Contribution

011

Amount of Each Disbursement this Period

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

5000
------

Full Name (Last, First, Middle Initial)

## C. ILLINOIS REPUBLICAN PARTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2012

Mailing Address PO Box 78

City Springfield State IL Zip Code 62705-0078

Transaction ID : SB23-106-1480-e

Purpose of Disbursement  
Political Contribution: Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**ILLINOIS REPUBLICAN PARTY**

Category/  
Type

5000
------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

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

11000.00
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**TOTAL** 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 Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)

**A. Lincoln Pac**

Mailing Address PO Box A3968

City Chicago State IL Zip Code 60690-3968

Purpose of Disbursement  
Political Contribution: Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2012

Transaction ID : SB23-1037-1488-e

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**B. Vernon Parker For Congress**

Mailing Address 5635 E Lincoln Drive # 18

City Paradise Valley State AZ Zip Code 85253-4121

Purpose of Disbursement  
Political Contribution: Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: AZ District: 09

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : SB23-1010-1484-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

6000.00

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

20000.00

# 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**JOHN S FUND**

Full Name (Last, First, Middle Initial)

### A. Illinois Republican State Senate Campaign Committee

Date of Disbursement

Mailing Address PO Box 3422

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

City Springfield State IL Zip Code 62708-3422

Transaction ID : SB29-1036-1487-e

Purpose of Disbursement  
Contribution- State and Local Support

011
Category/ Type

Amount of Each Disbursement this Period

Candidate Name

10000
-------

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

### B.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

### C.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

10000.00
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10000.00
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