

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Team America PAC

ADDRESS (number and street) 501 Church Street #315

Check if different than previously reported. (ACC)

Vienna VA 22180

2. **FEC IDENTIFICATION NUMBER** C00396291

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input checked="" type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 02 01 2011 through 02 28 2011

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

Type or Print Name of Treasurer Helen Fullinwider

Signature of Treasurer Electronically Filed by Helen Fullinwider Date 03 20 2011

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

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Team America PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	2

D	D
2	8

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>Y</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>	Y	Y	Y	Y	2	0	1	1		5237.57
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	3305.13									
(c) Total Receipts (from Line 19)	15829.00	26782.11								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	19134.13	32019.68								
7. Total Disbursements (from Line 31)	19075.32	31960.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	58.81	58.81								
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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Team America PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	2

D	D
2	8

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)	7725.00	8825.00
(ii) Unitemized	8104.00	17956.89
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15829.00	26781.89
(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)	15829.00	26781.89
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	0.22
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))	15829.00	26782.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15829.00	26782.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	19075.32	31960.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	19075.32	31960.87
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)	0.00	0.00
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	0.00
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))..	19075.32	31960.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19075.32	31960.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	15829.00	26781.89
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15829.00	26781.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19075.32	31960.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19075.32	31960.87

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 6 / 18
	<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	

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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Richard Graham	Date of Receipt MM / DD / YYYY 02 / 03 / 2011
	Mailing Address 12725 Tahosa Ln.	Transaction ID: 10218.C70655
	City State Zip Code Colorado Springs CO 80908-3220	Amount of Each Receipt this Period 525.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self employed	Occupation Storage	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

B.	Full Name (Last, First, Middle Initial) Laura Gutman	Date of Receipt MM / DD / YYYY 02 / 14 / 2011
	Mailing Address 310 Watts Street	Transaction ID: 10218.C70713
	City State Zip Code Durham NC 27701	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self employed	Occupation n/a	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) John Heindel	Date of Receipt MM / DD / YYYY 02 / 04 / 2011
	Mailing Address P.O. Box 3452	Transaction ID: 10320.C71409
	City State Zip Code Saratoga CA 95070	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self employed	Occupation civil engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional)	▶	825.00
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 7 / 18
	<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)
Team America PAC

A. Full Name (Last, First, Middle Initial)
Euvena Hobbs

Mailing Address 2351 Loma Dr.

City State Zip Code
Lemon Grove CA 91945-3817

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

Name of Employer N/A Occupation homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 28 / 2011
Transaction ID: 10320.C70811
Amount of Each Receipt this Period: 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Wayne Hoppe

Mailing Address 1819 Senter Ave.

City State Zip Code
Burlington CO 80807-1545

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

Name of Employer Self employed Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 02 / 03 / 2011
Transaction ID: 10218.C70657
Amount of Each Receipt this Period: 200.00
Receipt

C. Full Name (Last, First, Middle Initial)
Randolph Houchins

Mailing Address 5575 Preserve Cir.

City State Zip Code
Alpharetta GA 30005-8908

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

Name of Employer Self employed Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 02 / 04 / 2011
Transaction ID: 10218.C70672
Amount of Each Receipt this Period: 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team America PAC

A. Full Name (Last, First, Middle Initial)
Walter Kleiner

Mailing Address 1725 89th Place NE

City State Zip Code
Clyde Hill WA 98004-3213

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2011

Transaction ID: 10320.C70764

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Elizabeth Van Staaveren

Mailing Address 1008 NW Cascade Way

City State Zip Code
McMinnville OR 97128-9512

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2011

Transaction ID: 10218.C70697

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. Wilson

Mailing Address 5500 East Peakview Ave.
3303

City State Zip Code
Centennial CO 80121

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

Name of Employer Occupation
retired attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2011

Transaction ID: 10320.C71360

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **5500.00**

TOTAL This Period (last page this line number only) ▶ **7725.00**

**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)
Team America PAC

A. Full Name (Last, First, Middle Initial) Corporate Payroll Services Mailing Address 1803 Research Blvd Ste 300 City Rockville State MD Zip Code 20850-6108 Purpose of Disbursement payroll taxes 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: 10320.E5237 Date of Disbursement MM / DD / YYYY 02 / 15 / 2011
	Amount of Each Disbursement this Period 237.19 Category/Type PAYROLL TAXES

B. Full Name (Last, First, Middle Initial) Corporate Payroll Services Mailing Address 1803 Research Blvd Ste 300 City Rockville State MD Zip Code 20850-6108 Purpose of Disbursement payroll fees 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: 10320.E5236 Date of Disbursement MM / DD / YYYY 02 / 15 / 2011
	Amount of Each Disbursement this Period 35.95 Category/Type PAYROLL FEES

C. Full Name (Last, First, Middle Initial) Corporate Payroll Services Mailing Address 1803 Research Blvd Ste 300 City Rockville State MD Zip Code 20850-6108 Purpose of Disbursement payroll taxes 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: 10320.E5239 Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	Amount of Each Disbursement this Period 2218.90 Category/Type PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶	2492.04
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 10 / 18

<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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Corporate Payroll Services Mailing Address 1803 Research Blvd Ste 300 City Rockville State MD Zip Code 20850-6108 Purpose of Disbursement payroll fees 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: 10320.E5238 Date of Disbursement 02 / 28 / 2011 Amount of Each Disbursement this Period 42.35 PAYROLL FEES
B.	Full Name (Last, First, Middle Initial) Quill Mailing Address PO Box 37600 City Philadelphia State PA Zip Code 19101-0600 Purpose of Disbursement office supplies 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: 10320.E5231 Date of Disbursement 02 / 18 / 2011 Amount of Each Disbursement this Period 787.09 OFFICE SUPPLIES
C.	Full Name (Last, First, Middle Initial) MC Technologies Mailing Address 6419 White Oak Lane City Broad Run State VA Zip Code 20137- Purpose of Disbursement Office supplies/equipment mainten 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: 10320.E5233 Date of Disbursement 02 / 28 / 2011 Amount of Each Disbursement this Period 1043.70 OFFICE SUPPLIES/EQUIPMENT MAINTENAN

SUBTOTAL of Disbursements This Page (optional) ▶

1873.14

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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Herron Printing And Graphics <hr/> Mailing Address 7621 Rickenbacker Drive Suite 300 <hr/> City Gaithersburg State MD Zip Code 20879- <hr/> Purpose of Disbursement stationery Candidate Name <hr/> 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: 10320.E5234 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1270.99 <hr/> STATIONERY
B.	Full Name (Last, First, Middle Initial) AAMP <hr/> Mailing Address 9121 Antique Way <hr/> City Manassas State VA Zip Code 20110- <hr/> Purpose of Disbursement Postage for non cand specific mail Candidate Name <hr/> 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: 10320.E5226 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 5000.00 <hr/> POSTAGE FOR NON CAND SPECIFIC MAIL
C.	Full Name (Last, First, Middle Initial) Aristotle <hr/> Mailing Address 205 Pennsylvania Ave SE <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement credit card fees Candidate Name <hr/> 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: 10320.E5247 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 34.50 <hr/> CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional) ▶

6305.49

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 12 / 18

<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)
Team America PAC

<p>A. Full Name (Last, First, Middle Initial) Aristotle</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement credit card fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10320.E5244</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.00"/></p> <p>CREDIT CARD FEES</p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement credit card fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10320.E5248</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.45"/></p> <p>CREDIT CARD FEES</p>
<p>C. Full Name (Last, First, Middle Initial) Aristotle</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Credit card fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10320.E5245</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.00"/></p> <p>CREDIT CARD FEES</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="72.45"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**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)

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<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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 10320.E5249 Date of Disbursement MM / DD / YYYY 02 / 19 / 2011
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 21.50
	City Washington State DC Zip Code 20003-1164	
	Purpose of Disbursement credit card fees Candidate Name	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) ▼
		CREDIT CARD FEES

B.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 10320.E5250 Date of Disbursement MM / DD / YYYY 02 / 26 / 2011
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 24.25
	City Washington State DC Zip Code 20003-1164	
	Purpose of Disbursement Credit card fees Candidate Name	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) ▼
		CREDIT CARD FEES

C.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 10320.E5246 Date of Disbursement MM / DD / YYYY 02 / 26 / 2011
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 2.50
	City Washington State DC Zip Code 20003-1164	
	Purpose of Disbursement credit card fees Candidate Name	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) ▼
		CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional)	▶	48.25
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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Aristotle	Transaction ID: 10320.E5251
	Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period 9.25
	Purpose of Disbursement credit card fees Candidate Name	CREDIT CARD FEES
	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) Angela Buchanan	Transaction ID: 10320.E5224
	Mailing Address 11321 Hunt Farm Ln.	Date of Disbursement MM / DD / YYYY 02 / 10 / 2011
	City Oakton State VA Zip Code 22124-	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Payroll Candidate Name	PAYROLL
	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) Angela Buchanan	Transaction ID: 10320.E5225
	Mailing Address 11321 Hunt Farm Ln.	Date of Disbursement MM / DD / YYYY 02 / 14 / 2011
	City Oakton State VA Zip Code 22124-	Amount of Each Disbursement this Period 1100.00
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	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)	1709.25
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)

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<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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Angela Buchanan	Transaction ID: 10320.E5232 Date of Disbursement 02 / 24 / 2011
	Mailing Address 11321 Hunt Farm Ln.	Amount of Each Disbursement this Period 500.00
	City Oakton State VA Zip Code 22124-	
	Purpose of Disbursement payroll Candidate Name	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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Angela Buchanan	Transaction ID: 10320.E5243 Date of Disbursement 02 / 28 / 2011
	Mailing Address 11321 Hunt Farm Ln.	Amount of Each Disbursement this Period 1291.25
	City Oakton State VA Zip Code 22124-	
	Purpose of Disbursement payroll Candidate Name	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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Angela Buchanan	Transaction ID: 10320.E5242 Date of Disbursement 02 / 28 / 2011
	Mailing Address 11321 Hunt Farm Ln.	Amount of Each Disbursement this Period 91.25
	City Oakton State VA Zip Code 22124-	
	Purpose of Disbursement payroll Candidate Name	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) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	1882.50
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)

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<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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Kristin Larsen	Transaction ID: 10320.E5240 Date of Disbursement 02 / 15 / 2011
	Mailing Address 11322 Hunt Farm Lane	Amount of Each Disbursement this Period 638.85
	City Oakton State VA Zip Code 22124-1201	
	Purpose of Disbursement payroll Candidate Name	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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Kristin Larsen	Transaction ID: 10320.E5241 Date of Disbursement 02 / 28 / 2011
	Mailing Address 11322 Hunt Farm Lane	Amount of Each Disbursement this Period 934.25
	City Oakton State VA Zip Code 22124-1201	
	Purpose of Disbursement payroll Candidate Name	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) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Southwest Publishing	Transaction ID: 10320.E5228 Date of Disbursement 02 / 16 / 2011
	Mailing Address 2600 NW Topeka Blvd	Amount of Each Disbursement this Period 2000.00
	City Topeka State KS Zip Code 66617-1160	
	Purpose of Disbursement non cand specific mailing Candidate Name	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) ▼
		NON CAND SPECIFIC MAILING

SUBTOTAL of Disbursements This Page (optional)	3573.10
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)
Team America PAC

A.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: 10320.E5221
Date of Disbursement

Mailing Address PO Box 17577

/ /

City Baltimore State MD Zip Code 21297-0513

Amount of Each Disbursement this Period

Purpose of Disbursement
phone bill

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

PHONE BILL

State: District:

B.

Full Name (Last, First, Middle Initial)
Verizon

Transaction ID: 10320.E5230
Date of Disbursement

Mailing Address PO Box 17577

/ /

City Baltimore State MD Zip Code 21297-0513

Amount of Each Disbursement this Period

Purpose of Disbursement
phone bill

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

PHONE BILL

State: District:

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Transaction ID: 10320.E5219
Date of Disbursement

Mailing Address PO Box 17120

/ /

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

Purpose of Disbursement
phone bill

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

PHONE BILL

State: District:

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)

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<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)
Team America PAC

A.	Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 10320.E5235	
	Mailing Address PO Box 17120			Date of Disbursement 02 / 28 / 2011	
	City Tucson	State AZ	Zip Code 85731-7120	Amount of Each Disbursement this Period 162.17	
	Purpose of Disbursement phone bill		Category/ Type PHONE BILL		
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State:	District:			

SUBTOTAL of Disbursements This Page (optional) ▶

162.17

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

18744.34