

**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

Solutions America PAC

ADDRESS (number and street)

676A 9th Ave, #320

☐Check if different  
than previously  
reported. (ACC)

New York

NY

10036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00335448

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:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

16

2008

through

11

24

2008

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

Ryan Medrano (assistant treasurer)

Signature of Treasurer

Electronically Filed by Ryan Medrano (assistant treasurer)

Date

12

02

2008

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**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Solutions America PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		324457.09
(b) Cash on Hand at Beginning of Reporting Period .....	25865.56	
(c) Total Receipts (from Line 19) .....	20030.71	117461.06
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	45896.27	441918.15
7. Total Disbursements (from Line 31) .....	15334.73	411356.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	30561.54	30561.54
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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)

Page 3

Write or Type Committee Name  
Solutions America PAC

Report Covering the Period:

From:

M M D D Y Y W Y  
1 0 1 6 2 0 0 8

To:

M M D D Y Y W Y  
1 1 2 4 2 0 0 8

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	15000.00	100500.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	15000.00	100500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	5000.00	15500.00
(c) Other Political Committees (such as PACs) .....	20000.00	116000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....		
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.) .....	30.71	1461.06
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)) .....	20030.71	117461.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20030.71	117461.06

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	15334.73	393356.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	15334.73	393356.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	18000.00
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))..	15334.73	411356.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15334.73	411356.61

**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) .....	20000.00	116000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20000.00	116000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15334.73	393356.61
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15334.73	393356.61

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

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

FOR LINE NUMBER: PAGE 6 / 12

(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)

Solutions America PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Lhota

Mailing Address 35 Pierrepont St

City

Brooklyn

State

NY

Zip Code

11201-3359

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rainbow Media Enterprises

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 81202.C1079

Amount of Each Receipt this Period

2500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Tamra Lhota

Mailing Address 35 Pierrepont St

City

Brooklyn

State

NY

Zip Code

11201-3359

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 81202.C1078

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Marc L. Mukasey

Mailing Address 1177 Avenue of the Americas

City

New York

State

NY

Zip Code

10036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bracewell Giuliani

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 81202.C1082

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**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 7 / 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Solutions America PAC

**A.**

Full Name (Last, First, Middle Initial)

Howard Wilson

Mailing Address 156 E 79th St

City

New York

State

NY

Zip Code

10021-0435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Proskauer Rose LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 8

Transaction ID: 81202.C1080

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

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

15000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 12

(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)

Solutions America PAC

A.

Full Name (Last, First, Middle Initial)

Valero PAC

Mailing Address PO Box 696000

City

San Antonio

State

TX

Zip Code

78269

FEC ID number of contributing  
federal political committee.**C** C00109546

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 5 / 2 0 0 8

Transaction ID: 81202.C1081

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

5000.00

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

5000.00



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

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

FOR LINE NUMBER: PAGE 9 / 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Solutions America PAC

**A.**

Full Name (Last, First, Middle Initial)

Citibank, NA

Mailing Address 666 5th Ave  
6th Floor

City

New York

State

NY

Zip Code

10103-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1461.06

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C1083

Amount of Each Receipt this Period

30.71

Interest Received

**SUBTOTAL** of Receipts This Page (optional) .....

30.71

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

30.71

# **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 / 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Solutions America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Citibank, NA	<b>Transaction ID:</b> 81202.E1190 <b>Date of Disbursement</b>
Mailing Address 666 5th Ave 6th Floor	<div> <div>10</div> <div>21</div> <div>2008</div> </div>
City New York State NY Zip Code 10103-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement bank fees Candidate Name	<div>12.50</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>BANK FEES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Citibank, NA	<b>Transaction ID:</b> 81202.E1191 <b>Date of Disbursement</b>
Mailing Address 666 5th Ave 6th Floor	<div> <div>11</div> <div>03</div> <div>2008</div> </div>
City New York State NY Zip Code 10103-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement merchant banking fees Candidate Name	<div>168.15</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>MERCHANT BANKING FEES</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Citibank, NA	<b>Transaction ID:</b> 81202.E1192 <b>Date of Disbursement</b>
Mailing Address 666 5th Ave 6th Floor	<div> <div>11</div> <div>04</div> <div>2008</div> </div>
City New York State NY Zip Code 10103-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement bank fees Candidate Name	<div>18.20</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>BANK FEES</b>

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

**198.85**

**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 11 / 12

<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)  
Solutions America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Maria Comella	<b>Transaction ID:</b> 81202.E1196 <b>Date of Disbursement</b>
Mailing Address 7 Carmine Street	<div> <div>MM / DD / YY</div> <div>11 / 04 / 2008</div> </div>
City New York State NY Zip Code 10014-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Communications Consultant	<div>5000.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼
COMMUNICATIONS CONSULTANT	
<b>B.</b> Full Name (Last, First, Middle Initial) Ryan Medrano	<b>Transaction ID:</b> 81202.E1197 <b>Date of Disbursement</b>
Mailing Address 5 E 22nd St	<div> <div>MM / DD / YY</div> <div>10 / 21 / 2008</div> </div>
City New York State NY Zip Code 10010-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Compliance Consultant	<div>5000.00</div>
Candidate Name	<div>Category/Type</div>
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) ▼
COMPLIANCE CONSULTANT	
<b>C.</b> Full Name (Last, First, Middle Initial) Visa	<b>Transaction ID:</b> 81202.E1193 <b>Date of Disbursement</b>
Mailing Address PO Box 15153	<div> <div>MM / DD / YY</div> <div>10 / 20 / 2008</div> </div>
City Wilmington State DE Zip Code 19886-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CREDIT CARD: SEE BELOW	<div>5135.88</div>
Candidate Name	<div>Category/Type</div>
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: SEE BELOW	

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

15135.88

**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 / 12

<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)  
Solutions America PAC

**A.**

Full Name (Last, First, Middle Initial)

Chambers Hotel

Mailing Address 901 Hennepin Avenue

City Minneapolis State MN Zip Code 55403-

Purpose of Disbursement  
lodging expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81202.E1194

Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

2814.86

**[MEMO ITEM]**

MEMO: LODGING EXPENSE

**B.**

Full Name (Last, First, Middle Initial)

Continental Airlines

Mailing Address 1600 Smith Street

City Houston State TX Zip Code 77006-

Purpose of Disbursement  
travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81202.E1195

Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

2321.02

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

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

0.00

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

15334.73