FEC FORM 3X	AN	ID DISE	BURSE	CEIPTS MENTS ized Commi			Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		Example:If typi over the lines	ng, type			
Solutions America	PAC							
ADDRESS (number and	street)	76A 9th Ave, #3	320					
Check if differ than previousl reported. (ACC	У <u>I</u> Ni	ew York						-
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY	I		STATE 🛋	ZIPCO	de 🔺
C00335448	• • • •		3. IS TH REPO		NEW (N) <b>OR</b>		MENDED	
4. <b>TYPE OF REPO</b> (Choose One) (a) Quarterly Rep	,	b) Monthly Report Due On:	Feb 20 Mar 20	(M3)	May 20 (M5 Jun 20 (M6 Jul 20 (M7)	i) Sep	20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October Quarterly January 3	Report(Q3)		y Election t for the:	Primary (1 Convention		General Special (		Runoff (12R)
Year Only	on-election		y Election t for the: Election o		0G) 04	Runoff (3	30R) in the State of	Special (30S)
5. Covering Period	10	16	2008	through	11	24	2008	
I certify that I have exam Type or Print Name of T			st of my knowle (assistant treas	-	is true, corre	ct and complete.		
Signature of Treasurer	Electronically			ssistant treasure	<u>.</u>	Date 12	02	2008
NOTE : Submission of f	alse, erroneous	, or incomplete	information ma	ay subject the pe	rson signing	this Report to the	1	
Office Use Only							(Rev. 12/20	

		FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
٧		e or Type Committee Name olutions America PAC		
F	Repo		M M D D T Y Y W Y 2008 To:	M M         D D         Y Y Y         Y           11         24         2008
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a)	Cash on Hand January 1 Ž008 Y Y	[	324457.09
	(b)	Cash on Hand at Begining 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.	То	tal Disbursements (from Line 31)	15334.73	411356.61
8.	Re	sh on Hand at Close of porting Period ıbtract Line 7 from Line 6(d))	30561.54	30561.54
9.	the	bts and Obligations owed <b>TO</b> e committee (Itemize all on hedule C and/or Schedule D)	0.00	
10.	the	bts and Obligations owed <b>BY</b> committee (Itemize all on hedule C and/or Schedule D)	0.00	

SUMMARY PAGE

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

FE6AN026

Image# 28993317105

	FEC Form 3X (Rev. 06/2004)	OF RECEIPTS	Page 3
W	rite or Type Committee Name Solutions America PAC		
R	eport Covering the Period: From:	M M 16 Y Y W Y 10 16 2008 To	. 11 D D Y Y Y Y Y 2008
	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)	15000.00	100500.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	15000.00	100500.00
	(b) Political Party Committees	0.00	0.00
	<ul> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> <li>(d) Total Contributions (add Lines</li> </ul>	5000.00	15500.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	20000.00	116000.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14. 15.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	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 Fun	ds	
	(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

Image# 28993317107

## **DETAILED SUMMARY PAGE**

II. DISBURSEMENTS	COLUMN A	COLUMN B
1. Operating Expenditures:	Total This Period	Calendar Year-to-Date
<ul> <li>(a) Shared Federal/Non-Federal Activity (from Schedule H4)</li> <li>(i) Federal Share</li> </ul>	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	15334.73	393356.61
<ul> <li>(c) Total Operating Expenditures</li> <li>(add 21(a)(i), (a)(ii) and (b))</li> </ul>	15334.73	393356.61
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
<ol> <li>Contributions to Federal Candidates/Committees and Other Political Committees</li> </ol>	0.00	18000.00
<ol> <li>Independent Expenditure (use Schedule E)</li> </ol>	0.00	0.00
<ol> <li>Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)</li> </ol>	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
<ol> <li>Refunds of Contributions To:</li> <li>(a) Individuals/Persons Other</li> </ol>	0.00	0.00
Than Political Committees	0.00	0.00
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li><li>(auch as PAC)</li></ul>	0.00	0.00
(such as PACs) (d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c)) 🕨		
<ol> <li>Other Disbursements</li> </ol>	0.00	0.00
<ul> <li>Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity</li> <li>(from Schedule HE)</li> </ul>		
(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
<ol> <li>Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))</li> </ol>	15334.73	411356.61
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		

## Image# 28993317108

## DETAILED SUMMARY PAGE

	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

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements may not be sold or used by any perso	FOR LINE NUMBER:         PAGE 6 / 12           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17           on for the purpose of soliciting contributions         110         110         110         110				
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Solutions America PAC	solicit contributions from such committee.					
A.	Full Name (Last, First, Middle Initial) Joseph Lhota Mailing Address 35 Pierrepont St	Date of Receipt					
	City Brooklyn	State Zip Code NY 11201-3359	10     20     2008       Transaction ID: 81202.C1079       Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	2500.00				
	Name of Employer Rainbow Media Enterprises Receipt For: Primary General Other (specify) ▼	Occupation       Executive       Aggregate Year-to-Date       3000.00	Receipt				
- B.	Full Name (Last, First, Middle Initial) Tamra Lhota Mailing Address 35 Pierrepont St		Date of Receipt				
	City	State Zip Code	Transaction ID: 81202.C1078				
	Brooklyn FEC ID number of contributing federal political committee.	NY 11201-3359	Amount of Each Receipt this Period				
	Name of Employer Self Employed	Occupation Fundraiser	Receipt				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	]				
- C.	Full Name (Last, First, Middle Initial) Marc L. Mukasey		Date of Receipt				
	Mailing Address 1177 Avenue of the A	Americas	M M / D D / Y Y Y Y 11 1 12 2008				
	City New York	State Zip Code NY 10036	Transaction ID: 81202.C1082 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	5000.00				
	Name of Employer Bracewell Giuliani	Occupation Attorney	- Receipt				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	]				
ſ	SUBTOTAL of Receipts This Page (optional)		10000.00				
ŀ	TOTAL This Period (last page this line number						

	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)       11c       12         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and ad	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Solutions America PAC			
Α.	Full Name (Last, First, Middle Initial) Howard Wilson			Date of Receipt
	Mailing Address 156 E 79th St			M M / D D / Y Y Y Y 111 05 2008
	City	State	Zip Code	Transaction ID: 81202.C1080
	New York	NY	10021-0435	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer Proskauer Rose LLP	Occupatio Attorney	n	- Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	

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 for each cate Detailed Sum	ory of the	FOR LINE NUMBER:       PAGE 8 / 12         (check only one)       11a         11a       11b       11c       12         13       14       15       16       17					
	Any information copied from such Reports and St or for commercial purposes, other than using the	y information copied from such Reports and Statements may not be sold or used by any per for commercial purposes, other than using the name and address of any political committee								
	NAME OF COMMITTEE (In Full)									
	Solutions America PAC									
Α.	Full Name (Last, First, Middle Initial) Valero PAC				Date of Receipt					
	Mailing Address PO Box 696000				M M / D D / Y Y Y Y 111 05 2008					
	City	State	Zip Code		Transaction ID: 81202.C1081					
	San Antonio	ТХ	78269		Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	<b>C</b> C0	0109546		5000.00					
	Name of Employer	Occupatio	n		Receipt					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼	5000.00						

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
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Solutions America PAC			
Α.	Full Name (Last, First, Middle Initial) Citibank, NA			Date of Receipt
	Mailing Address 666 5th Ave 6th Floor			M M / D D / Y Y Y Y 10 30 2008
	City	State	Zip Code	Transaction ID: 81202.C1083
	New York	NY	10103-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.71
	Name of Employer	Occupatio	n	Interest Received
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1461.06	

SUBTOTAL of Receipts This Page (optional)						30.71	
TOTAL This Period (last page this line number only)	►					 30.71	

CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER:	PAGE 10/12			
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	22 23 28a 28b	24 25 28c 29			
ny Information copied from such Reports and State for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full)	le and address of any political col			Such commutee			
Solutions America PAC							
Full Name (Last, First, Middle Initial) Citibank, NA			Transaction ID: { Date of Disburseme				
Mailing Address 666 5th Ave 6th Floor			10 <sup>//</sup> 21	Ý ŽOŎ8			
City New York	StateZip CodeNY10103-0001		Amount of Each Dis	sbursement this Period			
Purpose of Disbursement				12.50			
bank fees Candidate Name		Category/ Type					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		BANK FEES				
Full Name (Last, First, Middle Initial)			Transaction ID: 8	31202.F1191			
Citibank, NA			Date of Disburseme	ent			
Mailing Address 666 5th Ave 6th Floor			1 1 <sup>/</sup> 0 3	Ý <b>Ý Ý Ý Ý Ý</b> Ý			
City New York	StateZip CodeNY10103-0001		Amount of Each Dis	sbursement this Period			
Purpose of Disbursement merchant banking fees				168.15			
Candidate Name	(	Category/ Type					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		MERCHANT BAN	IKING FEES			
Full Name (Last, First, Middle Initial) Citibank, NA			Transaction ID: { Date of Disburseme				
Mailing Address 666 5th Ave 6th Floor			1 1 / D 4	Ý Ž008 <sup>°</sup>			
City New York	StateZip CodeNY10103-0001		Amount of Each Dis	sbursement this Period			
Purpose of Disbursement bank fees			L	18.20			
Candidate Name	Category/ Type						
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) <b>V</b>		BANK FEES				
Sido. District.				· · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional)		►		198.85			

FEC Schedule B ( Form 3X) (Revised 02/2003)

ITEMIZED DISBURSEMENTS       for each category of the Dataled Summary Page       21b       22b       23b       24b       28c	SCHEDULE B (FEC Form 3X)			Use separate schedule(s)					NUMBER:				PAGE 11/12			
Ary Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such contributions from such contributions from such committee to solic	EMIZED DIS	BURSEMENTS	S for e	ach c	ategory of the		<u> </u>	21b	22	П		П		$\square$	25 29	$\square$
NAME OF COMMITTEE (In Full)         Solutions America PAC         Full Name (Last, First, Middle Initia)         Maria Comella         Maling Address       7 Carmine Street         City       NY         New York       NY         Purpose of Disbursement       Category/ Type         Office Sought:       House President         Senate       Disbursement For: Other (specify) ▼         City       Senate         Pyran Medrano       Transaction ID: 81202.E1 Date of Disbursement         Maling Address       5 E 22nd St         City       State         Pyran Medrano       Transaction ID: 81202.E1 Date of Disbursement         Maling Address       5 E 22nd St         City       State         New York       NY         New York       NY         Name (Last, First, Middle Initial)         Pyran Medrano       Transaction ID: 81202.E1         Maling Address       5 E 22nd St         City       State         New York       NY         Complicate Consultant       Category/ Type         Office Sought:       House         Senate       Disbursement For: District:         President       Disbursement For: Distri								person f	for the pu		se of s		ting co		outions	
Solutions America PAC         Full Name (Last, First, Middle Initial) Maria Cornella         Mailing Address       7 Carmine Street         City       State       Zip Code         New York       NY       10014-         Purpose of Disbursement       Communications Consultant       General         Candidate Name       Disbursement For:       Senate         President       District:       President         State:       District:       Transaction ID: 81202.E1         Full Name (Last, First, Middle Initial)       Transaction ID: 81202.E1         President       District:       COMMUNICATIONS CON         Full Name (Last, First, Middle Initial)       Transaction ID: 81202.E1         Para Medrano       Transaction ID: 81202.E1         Mailing Address       5 E 22nd St         City       State       Zip Code         New York       NY       10010-         Purpose of Disbursement       Compliance Consultant       General         Compliance Consultant       Disbursement For:       Compliance Consultant         Compliance Consultant       Disbursement For:       Compliance Consultant         Compliance Consultant       Disbursement For:       Compliance Consultant         Compliance Consultant <td< td=""><td></td><td></td><td>the name and a</td><td>ddres</td><td>s of any political</td><td>con</td><td>nmitte</td><td>ee to so</td><td>licit contr</td><td>ibut</td><td>ions fr</td><td>om s</td><td>such c</td><td>omn</td><td>nittee</td><td></td></td<>			the name and a	ddres	s of any political	con	nmitte	ee to so	licit contr	ibut	ions fr	om s	such c	omn	nittee	
Maria Comella       Date of Disbursement         Mailing Address       7 Carmine Street         City       State       Zip Code         New York       NY       10014-         Purpose of Disbursement       Category/       Transaction ID:         Candidate Name       Disbursement For:       Category/         Office Sought:       House       Disbursement For:       Communications Consultant         Ryan Medrano       District:       Transaction ID:       81202.E1         Mailing Address       5 E 22nd St       City       Amount of Each Disbursement         Mailing Address       5 E 22nd St       City       Amount of Each Disbursement         Compliance Consultant       Category/       Transaction ID:       81202.E1         Compliance Consultant       Category/       Type       State       State       State         Office Sought:       House       Disbursement For:       Category/       State       Disbursement         Office Sought:       House       Disbursement For:       Category/       Y       2       Y       Z         Full Name (Last, First, Middle Initial)       Prisarte       Disbursement For:       Category/       Y       2       Y       Z         Full Name (L		. ,														
Mailing Address       7 Carmine Street       1       0       4       2         City       State       Zip Code       Amount of Each Disbursement         New York       NY       10014-       Amount of Each Disbursement         Candidate Name       Categoryi       Type       State       COMMUNICATIONS CON         Office Sought:       House       Disbursement For:       Other (specify)       Communications Consultant       Communications Consultant       Communications Consultant       Communications Consultant       State       Transaction ID: 81202.E1         Ryan Medrano       NY       10010-       President       State       State Cip Code       Amount of Each Disbursement         New York       NY       10010-       Purpose of Disbursement       State       Disbursement For:       Compliance Consultant       State       Disbursement For:       State       Disbursement For:       State       State       Disbursement For:       Compliance Consultant       State       Disbursement For:       State       State       Disbursement For:       State       State       Disbursement       State       Disbursement       State       State       Disb		st, Middle Initial)							Date	of D	isburs	eme				
New York       NY       10014-         Purpose of Disbursement       Communications Consultant	Mailing Address	7 Carmine Street								м		) 4	/ Y	ž	0 ð 8	Y
Communications Consultant       Category/ Type       Category/ Type         Office Sought:       House Senate       Disbursement For: Other (specify) ▼       COMMUNICATIONS CON         State:       District:       Other (specify) ▼       Communications Consultant         Full Name (Last, First, Middle Initial) Ryan Medrano       Transaction ID: 81202.E1 Date of Disbursement         Mailing Address       5 E 22nd St         City       State       Zip Code NY         New York       NY         Purpose of Disbursement Compliance Consultant       Amount of Each Disbursement Category/ Type         Office Sought:       House President       Disbursement For: Other (specify) ▼         Coll State:       Disbursement For: Other (specify) ▼       ComPLIANCE CONSULT,         State:       Disbursement For: Other (specify) ▼       ComPLIANCE CONSULT,         Full Name (Last, First, Middle Initial)       Yisa       Transaction ID: 81202.E1 Date of Disbursement         Mailing Address       PO Box 15153       City       Amount of Each Disbursement         City       State       Zip Code       Amount of Each Disbursement         Mailing Address       PO Box 15153       City       Category/ Type         Office Sought:       House President       Disbursement For: Category/ Type       Category/ Type									Amou	int o	f Each	n Dis	burse	-		-
Office Sought:       House Senate       Disbursement For: President       COMMUNICATIONS CON         State:       District:       Disbursement For: President       Compliance Consultant       Transaction ID: 81202.E1         Railing Address       5 E 22nd St       Amount of Each Disbursement       10 m² / 21 / 22         City       State       Zip Code       Amount of Each Disbursement         Compliance Consultant       Category/ Type       50         Candidate Name       Disbursement For: Senate       General       COMPLIANCE CONSULT.         Full Name (Last, First, Middle Initial)       Disbursement For: Senate       General       ComPLIANCE CONSULT.         Full Name (Last, First, Middle Initial)       Disbursement For: Office Sought:       General       ComPLIANCE CONSULT.         Full Name (Last, First, Middle Initial)       Visa       Transaction ID: 81202.E1       Disbursement         Mailing Address       PO Box 15153       City       Amount of Each Disbursement       51         City       State       Zip Code       Amount of Each Disbursement       51         Office Sought:       House       Disbursement For: Office Sought:       Category/ Type       Category/ Type       51         CharD: SEE BELOW       Category/ Type       Category/ Type       Category/ Type       51	Communications Co								L.					50	00.00	)
Senate       Primary       General       COMMUNICATIONS CON         State:       District:       Other (specify)       ✓       Communication ID: 81202.E1         Ryan Medrano       Transaction ID: 81202.E1       Date of Disbursement       To ate of Disbursement         Mailing Address       5 E 22nd St       To ate of Disbursement       Momuni of Each Disbursement         City       State       Zip Code       Amount of Each Disbursement         New York       NY       10010-       Formary         Purpose of Disbursement       Category/       50         Compliance Consultant       Category/       50         Candidate Name       Disbursement For:       Compliance Consultant       Compliance Consultant         Cardidate Name       Disbursement For:       Other (specify)       Compliance Consultant         State:       Disbursement For:       Other (specify)       Compliance Consultant         State:       Disbursement For:       Compliance Disbursement       Transaction ID: 81202.E1         Date of Disbursement       Other (specify)        Transaction ID: 81202.E1         Disbursement       DE       19886-       Amount of Each Disbursement         Purpose of Disbursement       Category/       Type       State       State </td <td></td> <td></td> <td></td> <td></td> <td></td> <td>С</td> <td></td>						С										
Ryan Medrano       Initiation Of 2021         Mailing Address       5 E 22nd St         City       State       Zip Code         New York       NY       10010-         Purpose of Disbursement       Compliance Consultant       Category/ Type         Office Sought:       House       Disbursement For: Other (specify)       ComPLIANCE CONSULT.         State:       District:       President       Other (specify)       COMPLIANCE CONSULT.         Mailing Address       PO Box 15153       Transaction ID:       81202.E1         Date of Disbursement       Other (specify)       Amount of Each Disbursement         Mailing Address       PO Box 15153       Mailing Address       PO Box 15153         City       State       Zip Code       Amount of Each Disbursement         Wilmington       DE       19886-       Purpose of Disbursement         Office Sought:       House       Disbursement For: Other (specify)       Category'       Type         Office Sought:       House       Disbursement For: Other (specify)       Category'       Type         Office Sought:       House       Disbursement For: Other (specify)       CREDIT CARD: SEE BEL         State:       District:       Other (specify)       CREDIT CARD: SEE BEL <td>-</td> <td>Senate President</td> <td>Prima</td> <td>ry</td> <td></td> <td></td> <td></td> <td></td> <td>COM</td> <td>MUI</td> <td>NICA</td> <td>TIO</td> <td>NS C</td> <td>ON</td> <td>SULT</td> <td>'AN</td>	-	Senate President	Prima	ry					COM	MUI	NICA	TIO	NS C	ON	SULT	'AN
City       State       Zip Code       Amount of Each Disbursement         Compliance Consultant       Category/       50         Candidate Name       Category/       Type         Office Sought:       House       Disbursement For:       Category/         State:       District:       Primary       General       COMPLIANCE CONSULT.         State:       District:       Disbursement For:       Category/       COMPLIANCE CONSULT.         State:       District:       Other (specify) ▼       Compliance of Disbursement       Compliance of Disbursement         Full Name (Last, First, Middle Initial)       Visa       Transaction ID:       81202.E1         Mailing Address       PO Box 15153       Transaction ID:       81202.E1         City       State       Zip Code       Amount of Each Disbursement         Winnington       DE       19886-       Amount of Each Disbursement         Purpose of Disbursement       Category/       Type       51         Office Sought:       House       Disbursement For:       Category/       51         Office Sought:       House       Disbursement For:       Category/       51         Office Sought:       House       Disbursement For:       Category/       51	Full Name (Last, Fi													.E1	197	
New York       NY       10010-         Purpose of Disbursement       Compliance Consultant       Category/ Type       50         Office Sought:       House       Disbursement For:       Category/ Type       Compliance Consultant         Office Sought:       House       Disbursement For:       Compliance Consultant       Compliance Consultant         State:       District:       Other (specify)       ▼       Compliance Consultant         State:       District:       Other (specify)       ▼       Compliance Consultant         Wilm Name (Last, First, Middle Initial)       Visa       Transaction ID: 81202.E1       Date of Disbursement         Mailing Address       PO Box 15153       Transaction ID: 81202.E1       Date of Disbursement         City       State       Zip Code       Amount of Each Disbursement         Wilmington       DE       19886-       State       State         Purpose of Disbursement       Category/ Type       State       State       State       State         Office Sought:       House       Disbursement For:       Category/ Type       Category/ Type       State       State       Category/ Type         Office Sought:       House       Disbursement For:       Category/ Other (specify)       Category/ Type <td< td=""><td>Mailing Address</td><td>5 E 22nd St</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>М</td><td>/ 2</td><td>2<sup>D</sup>1</td><td>/ Y</td><td>ž</td><td>0 ð 8</td><td>Y</td></td<>	Mailing Address	5 E 22nd St								М	/ 2	2 <sup>D</sup> 1	/ Y	ž	0 ð 8	Y
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City       State       Zip Code         Wilmington       DE       19886-         Purpose of Disbursement       CREDIT CARD: SEE BELOW       51         Candidate Name       Category/ Type       Category/ Type       51         Office Sought:       House       Disbursement For:       Category/ Type       CREDIT CARD: SEE BEL         Office Sought:       House       Disbursement For:       Category/ Type       CREDIT CARD: SEE BEL         State:       District:       Other (specify)        CREDIT CARD: SEE BEL	Full Name (Last, Fi											-	-	.E1	193	
Wilmington       DE       19886-         Purpose of Disbursement       51         CREDIT CARD: SEE BELOW       Category/ Type         Candidate Name       Category/ Type         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       District:	Mailing Address	PO Box 15153							1 <sup>M</sup> 0	М	/ 2	20	/ Y	ž	0 ð 8	Y
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Office Sought:     House     Disbursement For:       Senate     Primary     General       President     Other (specify)       State:     District:	CREDIT CARD: S								L.					51	35.88	3
Senate     Primary     General       President     Other (specify)		Type														
454	-	Senate President	Prima	ry					CRE	DIT	CARI	D: \$	SEE I	3EL	ow	
			ptional)					•					1	151:	35.88	3
TOTAL This Period (last page this line number only)			· · ·													

C Schedule B ( Form 3X) (Revised 02/2003)

9	SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12/12
	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
	I EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 22 23 24 25 26
_			27 28a 28b 28c 29 30b
			by any person for the purpose of soliciting contributions
Ľ		name and address of any political	committee to solicit contributions from such committee
- ľ			
	Solutions America PAC		
Z	Full Name (Last First Middle Initial)		
Α.	Full Name (Last, First, Middle Initial) Chambers Hotel		Transaction ID: 81202.E1194
	Chambers Holer		Date of Disbursement
	Mailing Address 901 Hennepin Avenue		
	City	State Zip Code	Amount of Each Disbursement this Period
	Minneapolis	MN 55403-	
	Purpose of Disbursement		2814.86
	lodging expense		
	Candidate Name		Category/
		ursement For:	MEMO: LODGING EXPENSE
	Senate	Primary General	
	State: District:	Other (specify)	
В.	Full Name (Last, First, Middle Initial) Continental Airlines		Transaction ID: 81202.E1195
	Continental Annues		Date of Disbursement
	Mailing Address 1600 Smith Street		
	City	State Zip Code	Amount of Each Disbursement this Period
	Houston	TX 7 <sup>'</sup> 7006-	
	Purpose of Disbursement		2321.02
	travel expense		
	Candidate Name		Category/
			Type [MEMO ITEM]
		ursement For:	MEMO: TRAVEL EXPENSE
	Senate	Primary General	
	State: District:	Other (specify)	
	State: District:		

	SUBTOTAL of Disbursements This Page (optional)	•	0.00
	TOTAL This Period (last page this line number only)	►	15334.73
i	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)