

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Majority PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		0.00
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	1066908.13									
(c) Total Receipts (from Line 19)	1853903.77	4263304.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2920811.90	4263304.77								
7. Total Disbursements (from Line 31)	2705716.48	4048209.35								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	215095.42	215095.42								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Majority PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	611763.75	1711164.75
(ii) Unitemized	350.02	350.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	612113.77	1711514.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1233000.00	2543000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1845113.77	4254514.77
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)	8790.00	8790.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1853903.77	4263304.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1853903.77	4263304.77

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.....	-36190.82	321375.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	-36190.82	321375.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	95000.00	95000.00
24. Independent Expenditure (use Schedule E)	2496907.30	3262136.29
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	110000.00	110000.00
(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))	110000.00	110000.00
29. Other Disbursements.....	40000.00	259698.00
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))..	2705716.48	4048209.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2705716.48	4048209.35

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)	1845113.77	4254514.77
34. Total Contribution Refunds (from Line 28(d))	110000.00	110000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1735113.77	4144514.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	-36190.82	321375.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	8790.00	8790.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-44980.82	312585.06

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 63
(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)
Majority PAC

A. Full Name (Last, First, Middle Initial)
Allen Allen Allen & Allen

Mailing Address 1809 Staples Mill Road

City Richmond State VA Zip Code 23230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C18795784

Amount of Each Receipt this Period 10000.00

B. Full Name (Last, First, Middle Initial)
Anapol Schwartz Weiss Cohan Feldman & Smalley PC

Mailing Address 1710 Spruce Street

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
10 / 28 / 2010

Transaction ID: C18795782

Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Adrienne Arsht

Mailing Address 3031 Brickell Avenue

City Miami State FL Zip Code 33129

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Total Bank Chairman Emerita

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C18795540

Amount of Each Receipt this Period 50000.00

SUBTOTAL of Receipts This Page (optional) 65000.00

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 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Lisa B. Baron

Mailing Address 5950 Deloache Avenue

City State Zip Code
Dallas TX 75225

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

Name of Employer Occupation
Baron & Blue Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

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

Transaction ID: C18795555

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)
Beasley Allen Crow Methvin Portis & Miles PC

Mailing Address 218 Commerce Street

City State Zip Code
Montgomery AL 36104

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

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

Transaction ID: C18795564

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)
Kenneth Braunstein

Mailing Address 2273 Research Boulevard
Suite 200

City State Zip Code
Rockville MD 20850

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

Name of Employer Occupation
Self-Employed Attorney

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

Date of Receipt

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

Transaction ID: C18795512

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

20200.00

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 8 / 63
	<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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Kenneth Braunstein		Date of Receipt
	Mailing Address 2273 Research Boulevard Suite 200		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Rockville	MD	20850
	FEC ID number of contributing federal political committee. C		Transaction ID: C18795781
Name of Employer Self-Employed		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text" value="300.00"/>

B.	Full Name (Last, First, Middle Initial) Briggs & Counsel LLC		Date of Receipt
	Mailing Address 815 Commercial Street		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Rockport	ME	04856
	FEC ID number of contributing federal political committee. C		Transaction ID: C18795535
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	<input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) Britcher Leone & Roth LLC		Date of Receipt
	Mailing Address 175 Rock Road		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Glen Rock	NJ	07452
	FEC ID number of contributing federal political committee. C		Transaction ID: C18795532
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	<input type="text" value="2500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3800.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 9 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A. Full Name (Last, First, Middle Initial)
Charles C. Parsons & Associates

Mailing Address 128 C Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: C18795539

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Richard J. Dodson

Mailing Address 19343 Links Court

City Baton Rouge State LA Zip Code 70810

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Dodson, Hooks & Frederick, APLC Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: C18795549

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Stefan Edlis

Mailing Address 5333 N. Elston Avenue

City Chicago State IL Zip Code 60630

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 ▼ 10000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C18795518

Amount of Each Receipt this Period 10000.00

SUBTOTAL of Receipts This Page (optional) 11500.00

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 10 / 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

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

Mailing Address 77 Westcliff Road

City State Zip Code
Weston MA 02493

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

Name of Employer eScription Occupation
Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 75000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C18795508

Amount of Each Receipt this Period
75000.00

B.

Full Name (Last, First, Middle Initial)
Emily's List Non-Federal Fund

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: C18795507

Amount of Each Receipt this Period
100000.00

C.

Full Name (Last, First, Middle Initial)
Thomas F. Fay

Mailing Address 777 6th Street, NW
Suite 410

City State Zip Code
Washington DC 20001

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

Name of Employer Fay Kaplan Law, PA Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: C18795529

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **185000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Fay Kaplan Law PA

Mailing Address 777 6th Street, NW
Suite 410

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

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

Transaction ID: C18795544

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)
John P. Feroletto

Mailing Address Main Street
Suite 910

City State Zip Code
Buffalo NY 14202

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

Name of Employer Occupation
John Feroletto Attorneys
at Law Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: C18795551

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
Furr Henshaw And Ohanesian

Mailing Address PO Box 2909

City State Zip Code
Myrtle Beach SC 29578

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: C18795509

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional) ▶

14500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Golomb & Honik PC

Mailing Address 1515 Market Street
Suite 1100

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 25 / 2010

Transaction ID: C18795531

Amount of Each Receipt this Period 4000.00

B.

Full Name (Last, First, Middle Initial)
Agnes Gund

Mailing Address 1 East 53rd Street
7th Floor

City New York State NY Zip Code 10022

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Art Historian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: C18795513

Amount of Each Receipt this Period 25000.00

C.

Full Name (Last, First, Middle Initial)
Hawkeye Commodities Company

Mailing Address 1101 SE 37th Street

City Grimes State IA Zip Code 50111-4950

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 27 / 2010

Transaction ID: C18795787

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) 30000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Hickey Law Firm PA

Mailing Address 1401 Brickell Avenue
Suite 510

City Miami State FL Zip Code 33131

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C18795536

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Leo J. Hindery, Jr.

Mailing Address 405 Lexington Avenue
48th Floor

City New York State NY Zip Code 10174

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

Name of Employer Occupation
InterMedia Partners Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C18795537

Amount of Each Receipt this Period
10000.00

C.

Full Name (Last, First, Middle Initial)
Hoffman & Schweitzer

Mailing Address 360 West 31st Street
Suite 1506

City New York State NY Zip Code 10001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C18795783

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **12000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial) Ironworkers Political Education Fund		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 1750 New York Avenue NW Suite 400		Transaction ID: C18795418
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

B.

Full Name (Last, First, Middle Initial) Bruce J. Klores		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 1735 20th Street NW		Transaction ID: C18795553
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Bruce J. Kores & Associates PC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Koonz McKenney Johnson Depaolis & Lightfoot		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 2001 Pennsylvania Avenue NW Suite 450		Transaction ID: C18795565
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	23000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Langdon & Emison

Mailing Address 911 Main Street

City State Zip Code
Lexington MO 64067

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: C18795542

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
Law Offices Of Jack H Olender & Associates PC

Mailing Address 888 17th Street NW
4th Floor

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C18795546

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Law Offices Of Staci M. Yandle LLC

Mailing Address 1 Eagle Center
Suite 3A

City State Zip Code
O Fallon IL 62269

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C18795561

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial) League of Conservation Voters		Date of Receipt MM / DD / YYYY 11 / 02 / 2010
Mailing Address 1920 L Street, NW Suite 800		Transaction ID: C18795849
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46913.75
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 46913.75	

B.

Full Name (Last, First, Middle Initial) Charles Ledley		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 3 Avery Street #908		Transaction ID: C18795517
City Boston	State MA	Zip Code 02111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer Highfields Capital Management	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

C.

Full Name (Last, First, Middle Initial) Leventhal Brown & Puga PC		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 950 S Cherry Street Suite 600		Transaction ID: C18795778
City Denver	State CO	Zip Code 80246
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	76913.75
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial) Mike C. Miller		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 201 W Houston St.		Transaction ID: C18795511
City Marshall	State TX	Zip Code 75670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mike C. Miller, PC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Motley Rice LLC		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address PO Box 650001		Transaction ID: C18795556
City Mount Pleasant	State SC	Zip Code 29465
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Charles D. Naylor		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 839 S Beacon Street Suite 311		Transaction ID: C18795550
City San Pedro	State CA	Zip Code 90731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 18 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A. Full Name (Last, First, Middle Initial)
Neifert Byrne & Ozga PC

Mailing Address 1441 29th Street
Suite 310

City State Zip Code
West Des Moines IA 50266

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: C18795541

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James B. Nutter, Jr.

Mailing Address 1201 W 66th Street

City State Zip Code
Kansas City MO 64113

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

Name of Employer Occupation
James B. Nutter & Company President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: C18795412

Amount of Each Receipt this Period
50000.00

C. Full Name (Last, First, Middle Initial)
Paulson & Nace PLLC

Mailing Address 1615 New Hampshire Avenue NW

City State Zip Code
Washington DC 20009

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

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 0 / 2 2 / 2 0 1 0

Transaction ID: C18795545

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **55500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A. Full Name (Last, First, Middle Initial)
R. Edward Pfister, Jr.

Mailing Address 2000 Riverside Drive

City State Zip Code
Los Angeles CA 90039

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

Name of Employer Occupation
Hildebrand McLeod & Nelson LLP Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: C18795538

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Planned Parenthood Votes! Washington

Mailing Address 2001 East Madison Street

City State Zip Code
Seattle WA 98122

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 40000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: C18795506

Amount of Each Receipt this Period
25000.00

C. Full Name (Last, First, Middle Initial)
Planned Parenthood Votes! Washington

Mailing Address 2001 East Madison Street

City State Zip Code
Seattle WA 98122

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 40000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: C18795790

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **41000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Regan Zambri & Long PLLC

Mailing Address 1919 M Street, NW
Suite 350

City State Zip Code
Washington DC 20036

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

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 0 / 2 2 / 2 0 1 0

Transaction ID: C18795543

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Riccolo & Semelroth PC

Mailing Address 425 2nd Street SE
Suite 1140

City State Zip Code
Cedar Rapids IA 52410

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

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 0 / 2 7 / 2 0 1 0

Transaction ID: C18795785

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Rutter Mills LLP

Mailing Address 160 W Brambleton Avenue

City State Zip Code
Norfolk VA 23510

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C18795559

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

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 21 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Shrager Spivey & Sachs

Mailing Address One Commerce Square
2005 Market Street #2300

City State Zip Code
Philadelphia PA 19103

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C18795786

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Starr Gern Davison & Rubin PC

Mailing Address 105 Eisenhower Parkway

City State Zip Code
Roseland NJ 07068

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: C18795788

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Sugarman and Sugarman PC

Mailing Address One Beacon Street

City State Zip Code
Boston MA 02108

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: C18795557

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

4000.00

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 22 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Terrell Hogan Ellis Yegelwel PA

Mailing Address 233 E Bay Street
8th Floor

City State Zip Code
Jacksonville FL 32202

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

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 0 / 2 2 / 2 0 1 0

Transaction ID: C18795547

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
The Farrise Law Firm PC

Mailing Address 11301 West Olympic Boulevard
Suite 509

City State Zip Code
Los Angeles CA 90064

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

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 0 / 2 2 / 2 0 1 0

Transaction ID: C18795563

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
The Ruckdeschel Law Firm LLC

Mailing Address 5126 Dorsey Hall Drive
Suite 201

City State Zip Code
Ellicott City MD 21042

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

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

Transaction ID: C18795558

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional) ►

20000.00

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 23 / 63

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A.

Full Name (Last, First, Middle Initial)
Kenneth M. Trombly

Mailing Address 7112 Loch Lomond Drive

City State Zip Code
Bethesda MD 20817

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

Name of Employer Occupation
Schultz & Trombly PLLC Attorney

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

Date of Receipt

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

Transaction ID: C18795552

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Agnes Varis

Mailing Address 150 Central Park S

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Aegis Pharmaceuticals President & Founder

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt

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

Transaction ID: C18795807

Amount of Each Receipt this Period
10000.00

C.

Full Name (Last, First, Middle Initial)
Waks & Barnett PA

Mailing Address 9900 SW 107th Avenue
Suite 101

City State Zip Code
Miami FL 33176

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: C18795562

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)

10850.00

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 24 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A. Full Name (Last, First, Middle Initial)
Warshauer Law Group PC

Mailing Address 3350 Riverwood Parkway
Suite 2000

City Atlanta State GA Zip Code 30339

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: C18795533
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Water & Kraus, LLP

Mailing Address 3219 McKinney Avenue

City Dallas State TX Zip Code 75204

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: C18795530
 Amount of Each Receipt this Period: 10000.00

C. Full Name (Last, First, Middle Initial)
Weisbrod & Weisbrod LLP

Mailing Address 11551 Forest Central Drive
Suite 300

City Dallas State TX Zip Code 75243

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 22 / 2010
Transaction ID: C18795548
 Amount of Each Receipt this Period: 10000.00

SUBTOTAL of Receipts This Page (optional) ► 21000.00

TOTAL This Period (last page this line number only) ► 611763.75

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

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

FOR LINE NUMBER: PAGE 25 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Majority PAC

A. Full Name (Last, First, Middle Initial)
American Association For Justice PAC

Mailing Address 777 6th Street, NW
Ste. 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 1 0

Transaction ID: C18795419

Amount of Each Receipt this Period
50000.00

B. Full Name (Last, First, Middle Initial)
American Association For Justice PAC

Mailing Address 777 6th Street, NW
Ste. 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 1 0

Transaction ID: C18795516

Amount of Each Receipt this Period
175000.00

C. Full Name (Last, First, Middle Initial)
American Association For Justice PAC

Mailing Address 777 6th Street, NW
Ste. 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575000.00

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

Transaction ID: C18795789

Amount of Each Receipt this Period
100000.00

SUBTOTAL of Receipts This Page (optional) ► **325000.00**

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 26 / 63
(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)
Majority PAC

A. Full Name (Last, First, Middle Initial)
American Federation of Teachers AFL- CIO COPE
 Mailing Address 555 New Jersey Avenue NW
 City State Zip Code
 Washington DC 20001
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 1 0
Transaction ID: C18795514
 Amount of Each Receipt this Period
 100000.00
 FEC ID number of contributing federal political committee. **C** C00028860
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 498000.00

B. Full Name (Last, First, Middle Initial)
American Federation of Teachers AFL- CIO COPE
 Mailing Address 555 New Jersey Avenue NW
 City State Zip Code
 Washington DC 20001
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 8 / 2 0 1 0
Transaction ID: C18795515
 Amount of Each Receipt this Period
 50000.00
 FEC ID number of contributing federal political committee. **C** C00028860
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 498000.00

C. Full Name (Last, First, Middle Initial)
American Federation of Teachers AFL- CIO COPE
 Mailing Address 555 New Jersey Avenue NW
 City State Zip Code
 Washington DC 20001
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 1 0
Transaction ID: C18795791
 Amount of Each Receipt this Period
 48000.00
 FEC ID number of contributing federal political committee. **C** C00028860
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 498000.00

SUBTOTAL of Receipts This Page (optional) ► 198000.00
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 27 / 63
(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)
Majority PAC

A. Full Name (Last, First, Middle Initial)
DRIVE Committee Political Fund
Mailing Address 25 Louisiana Ave. NW
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00032979
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 185000.00
Date of Receipt 10 / 29 / 2010
Transaction ID: C18795776
Amount of Each Receipt this Period 20000.00

B. Full Name (Last, First, Middle Initial)
DRIVE Committee Political Fund
Mailing Address 25 Louisiana Ave. NW
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C** C00032979
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 185000.00
Date of Receipt 10 / 29 / 2010
Transaction ID: C18795777
Amount of Each Receipt this Period 15000.00

C. Full Name (Last, First, Middle Initial)
NEA Advocacy Fund
Mailing Address 1201 16th Street, NW Suite 422
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00489815
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500000.00
Date of Receipt 10 / 18 / 2010
Transaction ID: C18795451
Amount of Each Receipt this Period 400000.00

SUBTOTAL of Receipts This Page (optional) ► 435000.00
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 28 / 63
(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)
Majority PAC

A. Full Name (Last, First, Middle Initial)
Service Employees International Union COPE
 Mailing Address 1800 Massachusetts Ave NW
 City State Zip Code
 Washington DC 20036
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 1 0
Transaction ID: C18795422
 Amount of Each Receipt this Period
 250000.00
 FEC ID number of contributing federal political committee. **C** C00004036
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 650000.00

B. Full Name (Last, First, Middle Initial)
UAW-V-CAP
 Mailing Address 8000 East Jefferson
 City State Zip Code
 Detroit MI 48214
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 1 0
Transaction ID: C18795645
 Amount of Each Receipt this Period
 25000.00
 FEC ID number of contributing federal political committee. **C** C00002840
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 75000.00

SUBTOTAL of Receipts This Page (optional) ► 275000.00
TOTAL This Period (last page this line number only) ► 1233000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 29 / 63	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Shorr Johnson Magnus		Date of Receipt
	Mailing Address 1831 Chestnut Street Sixth Floor		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Philadelphia	State PA	Zip Code 19103
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: C18795808
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="8790.00"/>	
Aggregate Year-to-Date ▼		Refund	
<input type="text" value="8790.00"/>			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="8790.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="8790.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Campaign Finance Consultants	Transaction ID: D417661 Date of Disbursement
	Mailing Address 10 G Street, NE Suite 570	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="29"/> <input type="text" value="9"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services	<input type="text" value="2393.02"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Monica Dixon	Transaction ID: D417651 Date of Disbursement
	Mailing Address 5113 Duvall Drive	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="29"/> <input type="text" value="9"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Bethesda State MD Zip Code 20816	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary	<input type="text" value="4870.08"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Monica Dixon	Transaction ID: D417652 Date of Disbursement
	Mailing Address 5113 Duvall Drive	<input type="text" value="11"/> <input type="text" value="0"/> / <input type="text" value="15"/> <input type="text" value="5"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Bethesda State MD Zip Code 20816	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary	<input type="text" value="4870.08"/>
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12133.18"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 / 63

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Monica Dixon	Transaction ID: D417247 Date of Disbursement 10 / 15 / 2010
	Mailing Address 5113 Duvall Drive	Amount of Each Disbursement this Period 4862.04
	City Bethesda State MD Zip Code 20816	
	Purpose of Disbursement Salary 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) ▼

B.	Full Name (Last, First, Middle Initial) Monica Dixon	Transaction ID: D417696 Date of Disbursement 11 / 22 / 2010
	Mailing Address 5113 Duvall Drive	Amount of Each Disbursement this Period 9740.16
	City Bethesda State MD Zip Code 20816	
	Purpose of Disbursement Salary 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) ▼

C.	Full Name (Last, First, Middle Initial) Farinella & Associates	Transaction ID: D417239 Date of Disbursement 10 / 20 / 2010
	Mailing Address 7979 Bradwick Way	Amount of Each Disbursement this Period 30500.00
	City Melbourne State FL Zip Code 32940	
	Purpose of Disbursement Fundraising Consulting Services 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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	45102.20
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)
Majority PAC

<p>A. Full Name (Last, First, Middle Initial) Ariel Hayes</p> <p>Mailing Address 1712 16th Street, NW #404</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Research Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D417666 Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 7500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Katz Watson Group, Inc.</p> <p>Mailing Address 236 Massachusetts Ave, NE Suite 602</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D417660 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) New Partners Consulting Inc.</p> <p>Mailing Address 401 9th Street, NW Suite 725</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Communications Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D417508 Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 10000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

22500.00

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 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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D417653 Date of Disbursement 10 / 29 / 2010
	Mailing Address 3060 Williams Drive Suite 200	Amount of Each Disbursement this Period 3203.67
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D417654 Date of Disbursement 10 / 29 / 2010
	Mailing Address 3060 Williams Drive Suite 200	Amount of Each Disbursement this Period 52.89
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Services	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D417655 Date of Disbursement 11 / 15 / 2010
	Mailing Address 3060 Williams Drive Suite 200	Amount of Each Disbursement this Period 3203.67
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	6460.23
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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D417656 Date of Disbursement 11 / 15 / 2010
	Mailing Address 3060 Williams Drive Suite 200	Amount of Each Disbursement this Period 58.14
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Services	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D417502 Date of Disbursement 10 / 15 / 2010
	Mailing Address 3060 Williams Drive Suite 200	Amount of Each Disbursement this Period 3203.67
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D417697 Date of Disbursement 11 / 22 / 2010
	Mailing Address 3060 Williams Drive Suite 200	Amount of Each Disbursement this Period 6407.34
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	9669.15
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 35 / 63

<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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Perkins Coie, LLP	Transaction ID: D417664 Date of Disbursement 10 / 27 / 2010
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 15546.02
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & Accounting Services	
	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) ▼

B.	Full Name (Last, First, Middle Initial) Perkins Coie, LLP	Transaction ID: D417665 Date of Disbursement 10 / 27 / 2010
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 2450.90
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Legal & Accounting Services	
	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) ▼

C.	Full Name (Last, First, Middle Initial) Shorr Johnson Magnus	Transaction ID: D417444 Date of Disbursement 10 / 20 / 2010
	Mailing Address 1831 Chestnut Street Sixth Floor	Amount of Each Disbursement this Period -10635.00
	City Philadelphia State PA Zip Code 19103	
	Purpose of Disbursement See Schedule E, Included in \$47,635.00 IE	
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	7361.92
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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Shorr Johnson Magnus	Transaction ID: D417714 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1831 Chestnut Street Sixth Floor	Amount of Each Disbursement this Period -89365.00
	City Philadelphia State PA Zip Code 19103	
	Purpose of Disbursement See Schedule E, Included in \$339,365.00 IE	
	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) ▼

B.	Full Name (Last, First, Middle Initial) Shorr Johnson Magnus	Transaction ID: D417726 Date of Disbursement 10 / 30 / 2010
	Mailing Address 1831 Chestnut Street Sixth Floor	Amount of Each Disbursement this Period 8250.00
	City Philadelphia State PA Zip Code 19103	
	Purpose of Disbursement Excess Payment, to be Refunded	
	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) ▼

C.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417495 Date of Disbursement 10 / 14 / 2010
	Mailing Address 605 14th Street NW	Amount of Each Disbursement this Period 10.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Bank Fee	
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	-81105.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Majority PAC

A.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417496 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="60.00"/>
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417497 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="80.00"/>
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417498 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="45.00"/>
	Candidate Name	Category/Type
	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)	<input type="text" value="185.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417499 Date of Disbursement 10 / 19 / 2010
	Mailing Address 605 14th Street NW	Amount of Each Disbursement this Period 40.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Bank Fee 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) ▼

B.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417500 Date of Disbursement 10 / 20 / 2010
	Mailing Address 605 14th Street NW	Amount of Each Disbursement this Period 40.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Bank Fee 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) ▼

C.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417643 Date of Disbursement 10 / 21 / 2010
	Mailing Address 605 14th Street NW	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Bank Fee 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) ▼

SUBTOTAL of Disbursements This Page (optional)	110.00
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)

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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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417644 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="15.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417645 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="15.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417646 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="70.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417647 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="20.00"/>
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417648 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="40.00"/>
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) TD Bank, N.A.	Transaction ID: D417649 Date of Disbursement
	Mailing Address 605 14th Street NW	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="40.00"/>
	Candidate Name	Category/Type
	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)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Majority PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) TD Bank, N.A.</p> <p>Mailing Address 605 14th Street NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D417650 Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) The Ashmead Group</p> <p>Mailing Address 122 C Street, NW Suite 505</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D417658 Date of Disbursement 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 52140.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) The Contact Group</p> <p>Mailing Address PO Box 187</p> <p>City Queenstown State MD Zip Code 21658</p> <p>Purpose of Disbursement Telephone Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D417659 Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

52465.00

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)

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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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Travelers	Transaction ID: D417700 Date of Disbursement
	Mailing Address CL Remittance Center	<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City Hartford State CT Zip Code 06183-1008	Amount of Each Disbursement this Period
	Purpose of Disbursement Workers Compensation Insurance	<input type="text" value="378.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Waterfront Strategies	Transaction ID: D417727 Date of Disbursement
	Mailing Address 1010 Wisconsin Avenue, NW Suite 800	<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement See Schedule E	<input type="text" value="-111846.00"/>
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="-111468.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="-36386.32"/>

**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)
Majority PAC

A. Full Name (Last, First, Middle Initial)
Working For US PAC Inc.

Mailing Address 888 16th Street NW
Suite 333

City Washington State DC Zip Code 20006

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: D417503
Date of Disbursement
10 / 18 / 2010

Amount of Each Disbursement this Period
45000.00

B. Full Name (Last, First, Middle Initial)
Working For US PAC Inc.

Mailing Address 888 16th Street NW
Suite 333

City Washington State DC Zip Code 20006

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: D417504
Date of Disbursement
10 / 22 / 2010

Amount of Each Disbursement this Period
50000.00

SUBTOTAL of Disbursements This Page (optional)	▶	95000.00
TOTAL This Period (last page this line number only)	▶	95000.00

**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)

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<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 checked="" 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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Joshua B. Bekenstein	Transaction ID: D417505 Date of Disbursement 10 / 20 / 2010
	Mailing Address 52 High Rock Road	Amount of Each Disbursement this Period 100000.00
	City Wayland State MA Zip Code 01778	
	Purpose of Disbursement Refund 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) ▼

B.	Full Name (Last, First, Middle Initial) Agnes Varis	Transaction ID: D417657 Date of Disbursement 11 / 04 / 2010
	Mailing Address 150 Central Park S	Amount of Each Disbursement this Period 10000.00
	City New York State NY Zip Code 10019	
	Purpose of Disbursement Refund 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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	110000.00
TOTAL This Period (last page this line number only)	▶	110000.00

**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)

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<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)
Majority PAC

A.	Full Name (Last, First, Middle Initial) Vet Action Fund Inc.	Transaction ID: D417662 Date of Disbursement
	Mailing Address PO Box 10031	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97296	Amount of Each Disbursement this Period
	Purpose of Disbursement Donation	<input type="text" value="15000.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Vet Action Fund Inc.	Transaction ID: D417663 Date of Disbursement
	Mailing Address PO Box 10031	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97296	Amount of Each Disbursement this Period
	Purpose of Disbursement Donation	<input type="text" value="25000.00"/>
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="40000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="40000.00"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
11350 Random Hills Road, Suite 670

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	365792.73
---	-----------

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

Amount
200000.00

Transaction ID: D417674

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Ralston Lapp Media

Mailing Address
329 K Street, NW
Suite 101

City	State	Zip Code
Washington	DC	20007

Purpose of Expenditure Production Services	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	365792.73
---	-----------

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

Amount
243.80

Transaction ID: D417506

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	200243.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER ▼ C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

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

Mailing Address
1831 Chestnut Street
Sixth Floor

Amount
10148.03

City State Zip Code
Philadelphia PA 19103

Transaction ID: D417501

Purpose of Expenditure
Production Costs

Category/
Type

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

Name of Federal Candidate supported or Opposed by expenditure:
Rand Paul

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 157296.06

Disbursement For: Primary General
 Other (specify) : _____
2010

See Pre-General Report

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

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

Mailing Address
1831 Chestnut Street
Sixth Floor

Amount
85000.00

City State Zip Code
Philadelphia PA 19103

Transaction ID: D417563

Purpose of Expenditure
Media Buy

Category/
Type

Office Sought: House State: IA
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 408554.63

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	95148.03
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

Purpose of Expenditure Production Services	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	1459300.79
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
13566.73

Transaction ID: D417698

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

Purpose of Expenditure Production Services	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
John Reeves Raese

Calendar Year-To-Date Per Election for Office Sought	218941.36
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
2191.36

Transaction ID: D417699

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	15758.09
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER ▼ C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1831 Chestnut Street
Sixth Floor

Amount
339365.00

City State Zip Code
Philadelphia PA 19103

Transaction ID: D417713

Purpose of Expenditure Category/Type
Media Buy

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

Name of Federal Candidate supported or Opposed by expenditure:
Dino Rossi

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1459300.79

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1831 Chestnut Street
Sixth Floor

Amount
210000.00

City State Zip Code
Philadelphia PA 19103

Transaction ID: D417715

Purpose of Expenditure Category/Type
Media Buy

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

Name of Federal Candidate supported or Opposed by expenditure:
John Reeves Raese

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
218941.36

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	549365.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City Philadelphia	State PA	Zip Code 19103
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Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	1459300.79
---	------------

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

Amount
650000.00

Transaction ID: D417716

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rand Paul

Calendar Year-To-Date Per Election for Office Sought	157296.06
---	-----------

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

Amount
47635.00

Transaction ID: D417717

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	697635.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City State Zip Code
Philadelphia PA 19103

Purpose of Expenditure Category/Type
Media Buy

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Calendar Year-To-Date Per Election for Office Sought **408554.63**

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

Amount
150000.00

Transaction ID: D417718

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City State Zip Code
Philadelphia PA 19103

Purpose of Expenditure Category/Type
Media Buy

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Calendar Year-To-Date Per Election for Office Sought **408554.63**

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

Amount
50000.00

Transaction ID: D417720

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	200000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City Philadelphia	State PA	Zip Code 19103
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Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
John Reeves Raese

Calendar Year-To-Date Per Election for Office Sought	218941.36
---	-----------

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

Amount
6750.00

Transaction ID: D417721

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

Mailing Address
1831 Chestnut Street
Sixth Floor

City Philadelphia	State PA	Zip Code 19103
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Purpose of Expenditure Production Costs	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Calendar Year-To-Date Per Election for Office Sought	408554.63
---	-----------

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

Amount
18500.00

Transaction ID: D417722

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	25250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

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

Mailing Address
1831 Chestnut Street
Sixth Floor

Amount
1253.16

City State Zip Code
Philadelphia PA 19103

Transaction ID: D417723

Purpose of Expenditure
Production Costs

Category/Type

Office Sought: House State: IA
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 408554.63

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Shorr Johnson Magnus

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

Mailing Address
1831 Chestnut Street
Sixth Floor

Amount
75000.00

City State Zip Code
Philadelphia PA 19103

Transaction ID: D417725

Purpose of Expenditure
Media Buy

Category/Type

Office Sought: House State: IA
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 408554.63

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	76253.16
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon/Davis Media Group

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

Mailing Address
1028 33rd Street, NW, Suite 300

Amount
4865.00

City State Zip Code
Washington DC 20007

Transaction ID: D417342

Purpose of Expenditure
Production Costs

Category/Type

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

Name of Federal Candidate supported or Opposed by expenditure:
Kenneth R Buck

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
574650.00

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Dixon/Davis Media Group

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

Mailing Address
1028 33rd Street, NW, Suite 300

Amount
4165.00

City State Zip Code
Washington DC 20007

Transaction ID: D417678

Purpose of Expenditure
Production Costs

Category/Type

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

Name of Federal Candidate supported or Opposed by expenditure:
Kenneth R Buck

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
574650.00

Disbursement For: Primary General
 Other (specify) : _____
2010

See Pre-General Report

(a) SUBTOTAL of Itemized Independent Expenditures	9030.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Waterfront Strategies

Mailing Address
1010 Wisconsin Avenue, NW
Suite 800

City Washington	State DC	Zip Code 20007
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Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Kenneth R Buck

Calendar Year-To-Date Per Election for Office Sought	574650.00
---	-----------

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

Amount
175663.00

Transaction ID: D417688

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Waterfront Strategies

Mailing Address
1010 Wisconsin Avenue, NW
Suite 800

City Washington	State DC	Zip Code 20007
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Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Kenneth R Buck

Calendar Year-To-Date Per Election for Office Sought	574650.00
---	-----------

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

Amount
111846.00

Transaction ID: D417724

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	287509.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

Mailing Address
401 9th Street, NW
Suite 725

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

Purpose of Expenditure Live Calls	Category/ Type
--------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Bruce L Braley

Calendar Year-To-Date Per Election for Office Sought	408554.63
---	-----------

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

Amount
14000.00

Transaction ID: D417591

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

Mailing Address
401 9th Street, NW
Suite 725

City Washington	State DC	Zip Code 20004
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Purpose of Expenditure Internet Advertisements	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Kenneth R Buck

Calendar Year-To-Date Per Election for Office Sought	574650.00
---	-----------

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

Amount
15000.00

Transaction ID: D417683

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	29000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

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

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER ▼ C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

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

Mailing Address
401 9th Street, NW
Suite 725

Amount
15000.00

City State Zip Code
Washington DC 20004

Transaction ID: D417685

Purpose of Expenditure
Internet Advertisements
Category/Type

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

Name of Federal Candidate supported or Opposed by expenditure:
Michael F Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
574650.00

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

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

Mailing Address
401 9th Street, NW
Suite 725

Amount
20000.00

City State Zip Code
Washington DC 20004

Transaction ID: D417686

Purpose of Expenditure
Internet Advertisements
Category/Type

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

Name of Federal Candidate supported or Opposed by expenditure:
Patty Murray

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1459300.79

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	35000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Rebecca Lambe
Signature
Date M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

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

Mailing Address
401 9th Street, NW
Suite 725

Amount
20000.00

City State Zip Code
Washington DC 20004

Transaction ID: D417687

Purpose of Expenditure
Internet Advertisements
Category/Type

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

Name of Federal Candidate supported or Opposed by expenditure:
Dino Rossi

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1459300.79

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

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

Mailing Address
401 9th Street, NW
Suite 725

Amount
2002.14

City State Zip Code
Washington DC 20004

Transaction ID: D417689

Purpose of Expenditure
Automated Calls
Category/Type

Office Sought: House State: IA
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
408554.63

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22002.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
New Partners Consulting

Mailing Address
401 9th Street, NW
Suite 725

City Washington	State DC	Zip Code 20004
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Purpose of Expenditure Automated Calls	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Bruce L Braley

Calendar Year-To-Date Per Election for Office Sought	408554.63
---	-----------

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

Amount
2002.14

Transaction ID: D417690

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Abar Hutton Media

Mailing Address
6190 Grovedale Drive
Suite 200

City Alexandria	State VA	Zip Code 22310
--------------------	-------------	-------------------

Purpose of Expenditure Media Buy	Category/ Type
-------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Kenneth R Buck

Calendar Year-To-Date Per Election for Office Sought	574650.00
---	-----------

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

Amount
150000.00

Transaction ID: D417667

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	152002.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC		FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Ambrosino Muir & Hansen

Mailing Address
500 Sansome Street
Suite 201

City San Francisco	State CA	Zip Code 94111
-----------------------	-------------	-------------------

Purpose of Expenditure Direct Mail	Category/ Type
---------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Christine O'Donnell

Calendar Year-To-Date Per Election for Office Sought	45000.00
---	----------

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

Amount
45000.00

Transaction ID: D417668

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Data Farm Consulting LLC

Mailing Address
12932 W Glacier Drive

City Evansville	State WI	Zip Code 53536
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Purpose of Expenditure Data Services	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Bruce L Braley

Calendar Year-To-Date Per Election for Office Sought	408554.63
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
852.50

Transaction ID: D417669

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	45852.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER ▼ C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Data Farm Consulting LLC

Mailing Address
12932 W Glacier Drive

City Evansville	State WI	Zip Code 53536
Purpose of Expenditure Data Services		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Calendar Year-To-Date Per Election for Office Sought	408554.63
---	-----------

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

Amount
852.50

Transaction ID: D417670

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Data Farm Consulting LLC

Mailing Address
12932 W Glacier Drive

City Evansville	State WI	Zip Code 53536
Purpose of Expenditure Data Services		Category/ Type

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Calendar Year-To-Date Per Election for Office Sought	408554.63
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Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Amount
3307.57

Transaction ID: D417671

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4160.07
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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

Rebecca Lambe _____ Date M M / D D / Y Y Y Y
Signature 0 6 / 0 8 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Data Farm Consulting LLC

Mailing Address
12932 W Glacier Drive

City Evansville	State WI	Zip Code 53536
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Purpose of Expenditure Data Services	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Bruce L Braley

Calendar Year-To-Date Per Election for Office Sought	408554.63
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Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Amount
3307.57

Transaction ID: D417672

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Data Farm Consulting LLC

Mailing Address
12932 W Glacier Drive

City Evansville	State WI	Zip Code 53536
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Purpose of Expenditure Data Services	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Bruce L Braley

Calendar Year-To-Date Per Election for Office Sought	408554.63
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Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Amount
1238.53

Transaction ID: D417694

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4546.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Rebecca Lambe
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Majority PAC	FEC IDENTIFICATION NUMBER C C00484642
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Data Farm Consulting LLC

Mailing Address
12932 W Glacier Drive

City State Zip Code
Evansville WI 53536

Purpose of Expenditure Category/Type
Data Services

Name of Federal Candidate supported or Opposed by expenditure:
Benjamin M Lange

Calendar Year-To-Date Per Election for Office Sought
408554.63

Date
MM / DD / YYYY
11 / 01 / 2010

Amount
1238.52

Transaction ID: D417695

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Winning Connections

Mailing Address
317 Pennsylvania Ave, SE

City State Zip Code
Washington DC 20003

Purpose of Expenditure Category/Type
Live Calls

Name of Federal Candidate supported or Opposed by expenditure:
Scott McAdams

Calendar Year-To-Date Per Election for Office Sought
46913.75

Date
MM / DD / YYYY
11 / 01 / 2010

Amount
46913.75

Transaction ID: D417693

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

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	48152.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2496907.30

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

Rebecca Lambe
Signature

Date
MM / DD / YYYY
06 / 08 / 2011