

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
Jobs, Economy and Budget Fund (JEB Fund)

ADDRESS (number and street) PO Box 30844  
 Check if different than previously reported. (ACC) Bethesda MD 20824-0824

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00420695

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

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2014 through 07 / 31 / 2014

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

Type or Print Name of Treasurer Brenda Pejovich

Signature of Treasurer Brenda Pejovich [Electronically Filed] Date 08 / 20 / 2014

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Jobs, Economy and Budget Fund (JEB Fund)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="42295.76"/>	<input type="text" value="42295.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="114895.17"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19500"/>	<input type="text" value="356950"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="134395.17"/>	<input type="text" value="399245.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33442.29"/>	<input type="text" value="298292.88"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="100952.88"/>	<input type="text" value="100952.88"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Jobs, Economy and Budget Fund (JEB Fund)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4000	35700
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4000	35700
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	15500	311500
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19500	347200
12. Transfers From Affiliated/Other Party Committees.....	0	4750
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	5000
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	19500	356950
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19500	356950

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	18442.29	93792.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18442.29	93792.88
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000	199500
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	5000	5000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33442.29	298292.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33442.29	298292.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19500	347200
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19500	347200
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18442.29	93792.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18442.29	93792.88

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Jobs, Economy and Budget Fund (JEB Fund)**

**A. Paul Saltzman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 80 Sulgrave Road  
City Scarsdale State NY Zip Code 10583-4727  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Clearing House Association Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000

Date of Receipt 07 / 15 / 2014  
**Transaction ID : 1344-2021-c**  
Amount of Each Receipt this Period 1000

**B. Albert P. Hegyi**  
Full Name (Last, First, Middle Initial)  
Mailing Address 363 West Anchor Drive  
City Dakota Dunes State SD Zip Code 57049  
FEC ID number of contributing federal political committee. **C**  
Name of Employer 1st Financial Bank USA Occupation Chairman of the Board  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000

Date of Receipt 07 / 16 / 2014  
**Transaction ID : 1671-2020-c**  
Amount of Each Receipt this Period 2000

**C. Michael Solon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2218 Belle Haven Road  
City Alexandria State VA Zip Code 22307  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gramm Partners Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000

Date of Receipt 07 / 25 / 2014  
**Transaction ID : 1696-2036-c**  
Amount of Each Receipt this Period 1000

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Jobs, Economy and Budget Fund (JEB Fund)**

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

Mailing Address PO Box 3050  
501 Michigan Street

City Milwaukee State WI Zip Code 53201-3050

FEC ID number of contributing federal political committee. **C** C00185694

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  
07 / 21 / 2014  
**Transaction ID : 1310-2019-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**B. Depository Trust & Clearing Corporation (DTCC) PAC**

Mailing Address 228 South Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
07 / 25 / 2014  
**Transaction ID : 1516-2035-c**

Amount of Each Receipt this Period  
5000

Full Name (Last, First, Middle Initial)  
**C. International Paper PAC (IP-PAC)**

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
07 / 28 / 2014  
**Transaction ID : 1697-2038-c**

Amount of Each Receipt this Period  
2500

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Jobs, Economy and Budget Fund (JEB Fund)**

Full Name (Last, First, Middle Initial)  
**A. Massachusetts Mutual Life Insurance Co. PAC (MMPAC)**

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2014  
**Transaction ID : 1315-2034-c**

Amount of Each Receipt this Period  
 2000

Full Name (Last, First, Middle Initial)  
**B. New York Life Insurance Political Action Committee**

Mailing Address 51 Madison Avenue Room 1109

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2014  
**Transaction ID : 547-2037-c**

Amount of Each Receipt this Period  
 5000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15500.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Economy and Budget Fund (JEB Fund)**

Full Name (Last, First, Middle Initial)

**A. Complete Campaigns**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Software Service

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2014

Transaction ID : SB21B-242-2014-e

Amount of Each Disbursement this Period

150

Full Name (Last, First, Middle Initial)

**B. Hooks Solutions, LLC**

Mailing Address 403 1st Street SE

City Washington State DC Zip Code 20003-1827

Purpose of Disbursement  
PAC Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

Transaction ID : SB21B-194-2015-e

Amount of Each Disbursement this Period

4825

Full Name (Last, First, Middle Initial)

**C. St. Regis Deer Valley**

Mailing Address PO Box 4493

City Park City State UT Zip Code 84060

Purpose of Disbursement  
PAC Lodging

002

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2014

Transaction ID : SB21B-942-2016-e

Amount of Each Disbursement this Period

10000

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

14975.00

**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)  
**Jobs, Economy and Budget Fund (JEB Fund)**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement  
SEE MEMO ITEMS

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-219-2018-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement  
PAC Compliance Consulting

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-219-284-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of Campaign Financial Services (07/23/14)

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement  
PAC Printing

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-219-287-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of Campaign Financial Services (07/23/14)

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Jobs, Economy and Budget Fund (JEB Fund)**

Full Name (Last, First, Middle Initial)

**A. Rosa Mexicano**

Mailing Address 575 7th Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1459-2017-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Economy and Budget Fund (JEB Fund)**

Full Name (Last, First, Middle Initial)

**A. Friends of Jack Kingston**

Mailing Address PO Box 2133

City Savannah State GA Zip Code 31402

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Jack Kingston**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Runoff 2014

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2014

**Transaction ID : SB23-1668-2012-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**B. Walters for Congress**

Mailing Address 8001 Irvine Center Drive  
Suite 400

City Irvine State CA Zip Code 92618

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Mimi Walters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2014

**Transaction ID : SB23-1670-2013-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

10000.00

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

10000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Jobs, Economy and Budget Fund (JEB Fund)**

Full Name (Last, First, Middle Initial)

**A. Michael Grimm Legal Expense Trust**

Mailing Address 610 South Boulevard  
Suite 100

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
PAC Legal Defense Trust Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29-1664-2010-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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