

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PRIDE MOBILITY PRODUCTS CORP PAC

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="2013"/>	<input type="text" value="75289.02"/>	<input type="text" value="75289.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="65589.02"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5101.44"/>	<input type="text" value="5101.44"/>
(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="70690.46"/>	<input type="text" value="80390.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17600.00"/>	<input type="text" value="27300.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="53090.46"/>	<input type="text" value="53090.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PRIDE MOBILITY PRODUCTS CORP PAC

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).....	2076.44	2076.44
(ii) Unitemized	3025.00	3025.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5101.44	5101.44
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5101.44	5101.44
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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 Transfers (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))..... ▶	5101.44	5101.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5101.44	5101.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17600.00	27300.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	17600.00	27300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17600.00	27300.00

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)	5101.44	5101.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5101.44	5101.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial) A. Chuck Finn		Date of Receipt MM / DD / YYYY 06 / 28 / 2013 Transaction ID : SA11AI.5579
Mailing Address 505 Valley View Road		Amount of Each Receipt this Period 470.60
City Dallas	State PA	Zip Code 18612
FEC ID number of contributing federal political committee. C	Name of Employer Pride Mobility Products Corp.	Occupation Executive Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.60	

Full Name (Last, First, Middle Initial) B. Elizabeth Hastie		Date of Receipt MM / DD / YYYY 06 / 28 / 2013 Transaction ID : SA11AI.5600
Mailing Address 607 Mayfield Circle		Amount of Each Receipt this Period 500.00
City Clarkes Summit	State PA	Zip Code 18411
FEC ID number of contributing federal political committee. C	Name of Employer Pride Mobility Products Corp.	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Seth Johnson		Date of Receipt MM / DD / YYYY 06 / 28 / 2013 Transaction ID : SA11AI.5582
Mailing Address 8865 Western Hemlock Way		Amount of Each Receipt this Period 235.28
City Lorton	State VA	Zip Code 22079
FEC ID number of contributing federal political committee. C	Name of Employer Pride Mobility Products	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.28	

SUBTOTAL of Receipts This Page (optional).....▶	1205.88
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
PRIDE MOBILITY PRODUCTS CORP PAC

A. Doug Manternach
 Full Name (Last, First, Middle Initial)
 Mailing Address 132 Crystal Creek Rd.
 City State Zip Code
 Harding PA 18643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pride Mobility Products Vice President, R & D
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : SA11AI.5584
 Amount of Each Receipt this Period
 400.00

B. Walter Niziolek
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Overview Ct
 City State Zip Code
 Drums PA 18222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pride Mobility Products Corp Senior Vice President - Global Manufac
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : SA11AI.5588
 Amount of Each Receipt this Period
 235.28

C. Paul Rising
 Full Name (Last, First, Middle Initial)
 Mailing Address 21437 East Ottawa Circle
 City State Zip Code
 Aurora CO 80016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pride Mobility Products Sr. Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : SA11AI.5593
 Amount of Each Receipt this Period
 235.28

SUBTOTAL of Receipts This Page (optional).....▶	870.56
TOTAL This Period (last page this line number only).....▶	2076.44

**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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial)

A. BILIRAKIS FOR CONGRESS

Mailing Address PO BOX 606

City TARPON SPRINGS State FL Zip Code 34688

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: FL District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : SB23.5607

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BRALEY FOR IOWA

Mailing Address PO BOX 856

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2013

Transaction ID : SB23.5609

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BRALEY FOR IOWA

Mailing Address PO BOX 856

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : SB23.5622

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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 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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial)

A. CARTWRIGHT FOR CONGRESS

Mailing Address PO BOX 1805

City State Zip Code
PLAINS PA 18705

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2013

Transaction ID : SB23.5616

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF GLENN THOMPSON

Mailing Address 198 PARK ROAD

City State Zip Code
HOWARD PA 16841

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2013

Transaction ID : SB23.5610

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF PAT TOOMEY

Mailing Address 2720 JORDAN ROAD

City State Zip Code
OREFIELD PA 18069

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : SB23.5633

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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 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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial)

A. HAGAN FOR US SENATE INC

Mailing Address PO BOX 29103

City GREENSBORO State NC Zip Code 27429

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NC District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2013

Transaction ID : SB23.5611

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JIM GERLACH FOR CONGRESS COMMITTEE

Mailing Address PO BOX 87

City UWCHLAND State PA Zip Code 19480

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : SB23.5621

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LARSON FOR CONGRESS

Mailing Address PO BOX 479

City GLASTONBURY State CT Zip Code 06033

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : SB23.5634

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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 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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial)

A. LOU BARLETTA FOR CONGRESS

Mailing Address 1529 TERRACE BLVD
101 WEST BROAD STREET

City HAZLETON State PA Zip Code 18201

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2013

Transaction ID : SB23.5620

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. MARINO FOR CONGRESS

Mailing Address PO BOX 653

City WILLIAMSPORT State PA Zip Code 17703

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2013

Transaction ID : SB23.5618

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PRICE FOR CONGRESS

Mailing Address P.O. Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: GA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2013

Transaction ID : SB23.5613

Amount of Each Disbursement this Period

1000.00

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

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

4600.00

**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 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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial)

A. Richard Neal for Congress

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD State MA Zip Code 01108

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MA District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : SB23.5603

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2013

Transaction ID : SB23.5614

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Toomey for US Senate

Mailing Address P.O. Box 220

City Orefield State PA Zip Code 18069

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2013

Transaction ID : SB23.5619

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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 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)
PRIDE MOBILITY PRODUCTS CORP PAC

Full Name (Last, First, Middle Initial)

A. VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. BOX 48928

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: FL District: 16

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2013

Transaction ID : SB23.5605

Amount of Each Disbursement this Period

1000.00

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

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

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

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

Amount of Each Disbursement this Period

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

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

1000.00

17600.00
