

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Occupy Obama care

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="0"/>	<input type="text" value="0"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) Total Receipts (from Line 19).....	<input type="text" value="0"/>	<input type="text" value="0"/>
(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="0"/>	<input type="text" value="0"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0"/>	<input type="text" value="0"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0"/>	<input type="text" value="0"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	<input type="text" value="0"/>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	<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

13031114148

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Occupy Obama care

Report Covering the Period: From:

MM ' DD ' YYYY
01 ' 01 ' 2013

To:

MM ' DD ' YYYY
09 ' 12 ' 2013

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).....

0

0

(ii) Unitemized.....
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0

0

0

0

(b) Political Party Committees.....
(c) Other Political Committees (such as PACs).....

0

0

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0

0

12. Transfers From Affiliated/Other Party Committees.....

0

0

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

0

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)).....▶

0

0

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0

0

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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	<input type="text" value="0"/>	<input type="text" value="0"/>
(ii) Non-Federal Share	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Other Federal Operating Expenditures	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	<input type="text" value="0"/>	<input type="text" value="0"/>
22. Transfers to Affiliated/Other Party Committees	<input type="text" value="0"/>	<input type="text" value="0"/>
23. Contributions to Federal Candidates/Committees and Other Political Committees	<input type="text" value="0"/>	<input type="text" value="0"/>
24. Independent Expenditures (use Schedule E)	<input type="text" value="0"/>	<input type="text" value="0"/>
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	<input type="text" value="0"/>	<input type="text" value="0"/>
26. Loan Repayments Made	<input type="text" value="0"/>	<input type="text" value="0"/>
27. Loans Made	<input type="text" value="0"/>	<input type="text" value="0"/>
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Political Party Committees	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) Other Political Committees (such as PACs)	<input type="text" value="0"/>	<input type="text" value="0"/>
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	<input type="text" value="0"/>	<input type="text" value="0"/>
29. Other Disbursements	<input type="text" value="0"/>	<input type="text" value="0"/>
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	<input type="text" value="0"/>	<input type="text" value="0"/>
(ii) "Levin" Share	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Federal Election Activity Paid Entirely With Federal Funds	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	<input type="text" value="0"/>	<input type="text" value="0"/>
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	<input type="text" value="0"/>	<input type="text" value="0"/>
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	<input type="text" value="0"/>	<input type="text" value="0"/>

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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)	0	0
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

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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 OF

<input 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)
Occupy Obama card

Full Name (Last, First, Middle Initial)
None

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

MM	DD	YYYY
----	----	------

Amount of Each Receipt this Period

9999999999

Full Name (Last, First, Middle Initial)

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

MM	DD	YYYY
----	----	------

Amount of Each Receipt this Period

9999999999

Full Name (Last, First, Middle Initial)

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

MM	DD	YYYY
----	----	------

Amount of Each Receipt this Period

9999999999

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

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

9999999999
9999999999

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**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 OF

<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 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)
Occupy Obama care

A.

Full Name (Last, First, Middle Initial) *NONE*

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

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

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SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full)
Occupy ObamaCare

LOAN SOURCE Full Name (Last, First, Middle Initial)
NONE

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
<input type="text"/>	<input type="text"/>	<input type="text"/> % (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional) ▶

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt
9/12/13

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 9/12/13
 PREPARER DATE PREPARED

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