

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) HUCK PAC

ADDRESS (number and street) PO BOX 2008 LITTLE ROCK AR 72203

2. FEC IDENTIFICATION NUMBER C00448373 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 01 01 2011 through 06 30 2011

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 Bryan Jeffrey

Signature of Treasurer Electronically Filed by Bryan Jeffrey Date 07 31 2011

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

Office Use Only table with 7 columns and 1 row

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
HUCK PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	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>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		137660.40
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	137660.40									
(c) Total Receipts (from Line 19)	317544.88	317544.88								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	455205.28	455205.28								
7. Total Disbursements (from Line 31)	292734.00	292734.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	162471.28	162471.28								
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)	5353.75									

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
HUCK PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	127433.92	127433.92
(ii) Unitemized	182110.96	182110.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	309544.88	309544.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	8000.00	8000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	317544.88	317544.88
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 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))	317544.88	317544.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	317544.88	317544.88

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.....	292499.00	292499.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	292499.00	292499.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
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	235.00	235.00
(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))	235.00	235.00
29. Other Disbursements.....	0.00	0.00
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))..	292734.00	292734.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	292734.00	292734.00

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)	317544.88	317544.88
34. Total Contribution Refunds (from Line 28(d))	235.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	317309.88	317309.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	292499.00	292499.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	292499.00	292499.00

**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 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt
	Mailing Address 1690 S Walnut Drive		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Warsaw	IN	46580
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Refior Law Office		Occupation Paralegal	Transaction ID: SA11AI.27386
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="205.96"/>	<input type="text" value="20.12"/>

B.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt
	Mailing Address 1690 S Walnut Drive		<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Warsaw	IN	46580
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Refior Law Office		Occupation Paralegal	Transaction ID: SA11AI.27387
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.96"/>	<input type="text" value="5.00"/>

C.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt
	Mailing Address 1690 S Walnut Drive		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Warsaw	IN	46580
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Refior Law Office		Occupation Paralegal	Transaction ID: SA11AI.27388
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="215.96"/>	<input type="text" value="5.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.12"/>
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 7 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	1	1													
Mailing Address 1690 S Walnut Drive		Transaction ID: SA11AI.27389																				
City Warsaw	State IN	Zip Code 46580																				
FEC ID number of contributing federal political committee. C <input style="width: 100px;" type="text"/>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td style="width: 80%;"></td><td>5.00</td></tr></table>		5.00																		
	5.00																					
Name of Employer Refior Law Office	Occupation Paralegal																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td style="width: 80%;"></td><td>220.96</td></tr></table>		220.96																			
	220.96																					

B.

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	1	1													
Mailing Address 1690 S Walnut Drive		Transaction ID: SA11AI.27390																				
City Warsaw	State IN	Zip Code 46580																				
FEC ID number of contributing federal political committee. C <input style="width: 100px;" type="text"/>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td style="width: 80%;"></td><td>5.00</td></tr></table>		5.00																		
	5.00																					
Name of Employer Refior Law Office	Occupation Paralegal																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td style="width: 80%;"></td><td>225.96</td></tr></table>		225.96																			
	225.96																					

C.

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	1	1													
Mailing Address 1690 S Walnut Drive		Transaction ID: SA11AI.27391																				
City Warsaw	State IN	Zip Code 46580																				
FEC ID number of contributing federal political committee. C <input style="width: 100px;" type="text"/>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td style="width: 80%;"></td><td>5.00</td></tr></table>		5.00																		
	5.00																					
Name of Employer Refior Law Office	Occupation Paralegal																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td style="width: 80%;"></td><td>230.96</td></tr></table>		230.96																			
	230.96																					

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">15.00</td></tr></table>	15.00
15.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.96

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

Transaction ID: SA11AI.27392

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.96

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

Transaction ID: SA11AI.27393

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.08

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

Transaction ID: SA11AI.30154

Amount of Each Receipt this Period
20.12

SUBTOTAL of Receipts This Page (optional) ► **30.12**

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 9 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City: Warsaw State: IN Zip Code: 46580

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

Name of Employer: Refior Law Office Occupation: Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.20

Date of Receipt: 03 / 03 / 2011
Transaction ID: SA11AI.30155
 Amount of Each Receipt this Period: 20.12

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City: Warsaw State: IN Zip Code: 46580

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

Name of Employer: Refior Law Office Occupation: Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.20

Date of Receipt: 03 / 05 / 2011
Transaction ID: SA11AI.30156
 Amount of Each Receipt this Period: 5.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City: Warsaw State: IN Zip Code: 46580

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

Name of Employer: Refior Law Office Occupation: Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.20

Date of Receipt: 03 / 08 / 2011
Transaction ID: SA11AI.30157
 Amount of Each Receipt this Period: 5.00

SUBTOTAL of Receipts This Page (optional) ► 30.12

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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer</p> <p>Mailing Address 1690 S Walnut Drive</p> <p>City <u>Warsaw</u> State <u>IN</u> Zip Code <u>46580</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Refior Law Office Occupation Paralegal</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 296.20</p>	<p>Date of Receipt 03 / 10 / 2011</p> <p>Transaction ID: SA11AI.30158</p> <p>Amount of Each Receipt this Period 5.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer</p> <p>Mailing Address 1690 S Walnut Drive</p> <p>City <u>Warsaw</u> State <u>IN</u> Zip Code <u>46580</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Refior Law Office Occupation Paralegal</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 301.20</p>	<p>Date of Receipt 03 / 10 / 2011</p> <p>Transaction ID: SA11AI.30159</p> <p>Amount of Each Receipt this Period 5.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer</p> <p>Mailing Address 1690 S Walnut Drive</p> <p>City <u>Warsaw</u> State <u>IN</u> Zip Code <u>46580</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Refior Law Office Occupation Paralegal</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 306.20</p>	<p>Date of Receipt 03 / 10 / 2011</p> <p>Transaction ID: SA11AI.30160</p> <p>Amount of Each Receipt this Period 5.00</p>
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SUBTOTAL of Receipts This Page (optional)	15.00
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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.20
 Date of Receipt 03 / 10 / 2011
Transaction ID: SA11AI.30161
 Amount of Each Receipt this Period 5.00

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.20
 Date of Receipt 03 / 10 / 2011
Transaction ID: SA11AI.30162
 Amount of Each Receipt this Period 5.00

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.20
 Date of Receipt 03 / 10 / 2011
Transaction ID: SA11AI.30163
 Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00
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 / 236
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 326.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2011

Transaction ID: SA11AI.30164

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2011

Transaction ID: SA11AI.30165

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2011

Transaction ID: SA11AI.30166

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **15.00**

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 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 341.20

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2011

Transaction ID: SA11AI.30167

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.20

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2011

Transaction ID: SA11AI.30168

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.20

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2011

Transaction ID: SA11AI.30169

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **15.00**

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 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt MM / DD / YYYY 03 / 16 / 2011
Mailing Address 1690 S Walnut Drive		Transaction ID: SA11AI.30170
City Warsaw	State IN	Zip Code 46580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Refior Law Office	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.20	

B.

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt MM / DD / YYYY 03 / 17 / 2011
Mailing Address 1690 S Walnut Drive		Transaction ID: SA11AI.30171
City Warsaw	State IN	Zip Code 46580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Refior Law Office	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.20	

C.

Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer		Date of Receipt MM / DD / YYYY 03 / 17 / 2011
Mailing Address 1690 S Walnut Drive		Transaction ID: SA11AI.30172
City Warsaw	State IN	Zip Code 46580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Refior Law Office	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.20	

SUBTOTAL of Receipts This Page (optional)	15.00
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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 371.20
 Date of Receipt 03 / 18 / 2011
Transaction ID: SA11AI.30173
 Amount of Each Receipt this Period 5.00

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 376.20
 Date of Receipt 03 / 18 / 2011
Transaction ID: SA11AI.30174
 Amount of Each Receipt this Period 5.00

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.20
 Date of Receipt 03 / 20 / 2011
Transaction ID: SA11AI.30175
 Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00
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 16 / 236
(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
							17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2011

Transaction ID: SA11AI.30176

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2011

Transaction ID: SA11AI.30177

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 396.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2011

Transaction ID: SA11AI.30178

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00

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 17 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.20
 Date of Receipt M M / D D / Y Y Y Y Y
 03 / 23 / 2011
Transaction ID: SA11AI.30179
 Amount of Each Receipt this Period 5.00

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.20
 Date of Receipt M M / D D / Y Y Y Y Y
 03 / 23 / 2011
Transaction ID: SA11AI.30180
 Amount of Each Receipt this Period 5.00

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.20
 Date of Receipt M M / D D / Y Y Y Y Y
 03 / 24 / 2011
Transaction ID: SA11AI.30181
 Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00
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 18 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 03 / 24 / 2011
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.30182
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.20	

B.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 03 / 24 / 2011
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.30183
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 421.20	

C.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 03 / 24 / 2011
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.30184
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 426.20	

SUBTOTAL of Receipts This Page (optional)	15.00
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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.20
 Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.30185
 Amount of Each Receipt this Period 5.00

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.20
 Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.30186
 Amount of Each Receipt this Period 5.00

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.20
 Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.30187
 Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00
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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
Mailing Address 1690 S Walnut Drive
City State Zip Code
Warsaw IN 46580
FEC ID number of contributing federal political committee. **C**
Name of Employer Refior Law Office Occupation Paralegal
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 446.20
Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.30188
Amount of Each Receipt this Period 5.00

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
Mailing Address 1690 S Walnut Drive
City State Zip Code
Warsaw IN 46580
FEC ID number of contributing federal political committee. **C**
Name of Employer Refior Law Office Occupation Paralegal
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 451.20
Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.30189
Amount of Each Receipt this Period 5.00

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
Mailing Address 1690 S Walnut Drive
City State Zip Code
Warsaw IN 46580
FEC ID number of contributing federal political committee. **C**
Name of Employer Refior Law Office Occupation Paralegal
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 456.20
Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.30190
Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00
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 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Occupation
Refior Law Office Paralegal

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 461.20

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.30191

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Occupation
Refior Law Office Paralegal

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 466.20

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.30192

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Occupation
Refior Law Office Paralegal

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 471.20

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.30193

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

15.00

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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.32
 Date of Receipt 03 / 30 / 2011
Transaction ID: SA11AI.30194
 Amount of Each Receipt this Period 20.12

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 511.44
 Date of Receipt 03 / 31 / 2011
Transaction ID: SA11AI.30195
 Amount of Each Receipt this Period 20.12

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.56
 Date of Receipt 04 / 04 / 2011
Transaction ID: SA11AI.35339
 Amount of Each Receipt this Period 20.12

SUBTOTAL of Receipts This Page (optional) ► 60.36
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 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 551.68

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

Transaction ID: SA11AI.35340

Amount of Each Receipt this Period
20.12

B.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 571.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.35341

Amount of Each Receipt this Period
20.12

C.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City State Zip Code
Warsaw IN 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 591.92

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

Transaction ID: SA11AI.35345

Amount of Each Receipt this Period
20.12

SUBTOTAL of Receipts This Page (optional) ► **60.36**

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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 5 / 2 0 1 1
Transaction ID: SA11AI.35347
 Amount of Each Receipt this Period
 10.40
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 602.32

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 3 / 2 0 1 1
Transaction ID: SA11AI.35348
 Amount of Each Receipt this Period
 20.12
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 622.44

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 1 1
Transaction ID: SA11AI.35349
 Amount of Each Receipt this Period
 20.12
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 642.56

SUBTOTAL of Receipts This Page (optional) ► 50.64
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 25 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 05 / 19 / 2011
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.34025
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1642.56	

B.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.34026
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1692.56	

C.	Full Name (Last, First, Middle Initial) Shelley Ahlersmeyer	Date of Receipt MM / DD / YYYY 06 / 16 / 2011
	Mailing Address 1690 S Walnut Drive	Transaction ID: SA11AI.38320
	City State Zip Code Warsaw IN 46580	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Refior Law Office Occupation Paralegal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1717.56	

SUBTOTAL of Receipts This Page (optional)	1075.00
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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 1 1
Transaction ID: SA11AI.38398
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1742.56

B. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 8 / 2 0 1 1
Transaction ID: SA11AI.39086
 Amount of Each Receipt this Period
 20.12
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1762.68

C. Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer
 Mailing Address 1690 S Walnut Drive
 City State Zip Code
 Warsaw IN 46580
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 1 1
Transaction ID: SA11AI.39502
 Amount of Each Receipt this Period
 20.12
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Refior Law Office Occupation Paralegal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1782.80

SUBTOTAL of Receipts This Page (optional) ▶ 65.24
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 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelley Ahlersmeyer

Mailing Address 1690 S Walnut Drive

City Warsaw State IN Zip Code 46580

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

Name of Employer Refior Law Office Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1802.92

Date of Receipt: 06 / 30 / 2011
Transaction ID: SA11AI.39752
 Amount of Each Receipt this Period: 20.12

B.

Full Name (Last, First, Middle Initial)
Art Ally

Mailing Address 624 Eden Park Avenue

City Altamonte Springs State FL Zip Code 32714

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

Name of Employer Timothy Partners, Ltd Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 03 / 03 / 2011
Transaction ID: SA11AI.29509
 Amount of Each Receipt this Period: 1500.00

C.

Full Name (Last, First, Middle Initial)
Florence Attridge

Mailing Address 2820 Habersham Rd., NW

City Atlanta State GA Zip Code 30305

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 28 / 2011
Transaction ID: SA11AI.29361
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **1770.12**

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 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Nicholas Babiak

Mailing Address 965 N. Harrison St.

City State Zip Code
Arlington VA 22205

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2011

Transaction ID: SA11AI.33684

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
J. Alex Bell

Mailing Address 328 Margie Dr.

City State Zip Code
Warner Robins GA 31088

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

Name of Employer Family Dental Associates Occupation Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2011

Transaction ID: SA11AI.39544

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City State Zip Code
Tampa FL 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2011

Transaction ID: SA11AI.27052

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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 29 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Patricia Bellairs		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
Mailing Address 3005 Bay Vista Avenue		Transaction ID: SA11AI.27053
City Tampa	State FL	Zip Code 33611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Moffitt Cancer Center	Occupation Registered Nurse	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Patricia Bellairs		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
Mailing Address 3005 Bay Vista Avenue		Transaction ID: SA11AI.27054
City Tampa	State FL	Zip Code 33611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Moffitt Cancer Center	Occupation Registered Nurse	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

C.

Full Name (Last, First, Middle Initial) Patricia Bellairs		Date of Receipt MM / DD / YYYY 03 / 21 / 2011
Mailing Address 3005 Bay Vista Avenue		Transaction ID: SA11AI.29581
City Tampa	State FL	Zip Code 33611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Moffitt Cancer Center	Occupation Registered Nurse	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 30 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Patricia Bellairs
Mailing Address 3005 Bay Vista Avenue
City Tampa State FL Zip Code 33611
FEC ID number of contributing federal political committee. **C**
Name of Employer Moffitt Cancer Center Occupation Registered Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00
Date of Receipt 03 / 28 / 2011
Transaction ID: SA11AI.29582
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Patricia Bellairs
Mailing Address 3005 Bay Vista Avenue
City Tampa State FL Zip Code 33611
FEC ID number of contributing federal political committee. **C**
Name of Employer Moffitt Cancer Center Occupation Registered Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt 03 / 28 / 2011
Transaction ID: SA11AI.29583
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Patricia Bellairs
Mailing Address 3005 Bay Vista Avenue
City Tampa State FL Zip Code 33611
FEC ID number of contributing federal political committee. **C**
Name of Employer Moffitt Cancer Center Occupation Registered Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 510.00
Date of Receipt 04 / 21 / 2011
Transaction ID: SA11AI.34851
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00
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 31 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 04 / 28 / 2011
Transaction ID: SA11AI.34852
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt 04 / 28 / 2011
Transaction ID: SA11AI.34853
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 05 / 21 / 2011
Transaction ID: SA11AI.33877
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 32 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 710.00

Date of Receipt 05 / 28 / 2011
Transaction ID: SA11AI.33878
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 05 / 28 / 2011
Transaction ID: SA11AI.33879
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Patricia Bellairs

Mailing Address 3005 Bay Vista Avenue

City Tampa State FL Zip Code 33611

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

Name of Employer Moffitt Cancer Center Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt 06 / 21 / 2011
Transaction ID: SA11AI.38757
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 33 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Patricia Bellairs	Date of Receipt MM / DD / YYYY 06 / 28 / 2011
	Mailing Address 3005 Bay Vista Avenue	Transaction ID: SA11AI.38917
	City State Zip Code Tampa FL 33611	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Moffitt Cancer Center Occupation: Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 860.00	

B.	Full Name (Last, First, Middle Initial) Patricia Bellairs	Date of Receipt MM / DD / YYYY 06 / 28 / 2011
	Mailing Address 3005 Bay Vista Avenue	Transaction ID: SA11AI.38918
	City State Zip Code Tampa FL 33611	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Moffitt Cancer Center Occupation: Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 910.00	

C.	Full Name (Last, First, Middle Initial) Geoff Besso	Date of Receipt MM / DD / YYYY 04 / 05 / 2011
	Mailing Address 6803 Pinebrooke Drive	Transaction ID: SA11AI.35213
	City State Zip Code Hudson OH 44236	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Besso Clinic Occupation: Chiropractor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	350.00
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 34 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Jesse Biter

Mailing Address 1233 N. Gulfstream Ave.

City State Zip Code
Sarasota FL 34236

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

Name of Employer Occupation
Biter Enterprises President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 18 / 2011

Transaction ID: SA11AI.26088

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Katie Biter

Mailing Address 1233 N. Gulfstream Ave.

City State Zip Code
Sarasota FL 34236

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 18 / 2011

Transaction ID: SA11AI.26090

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Gordon Blocker

Mailing Address 2802 Highcrest Drive

City State Zip Code
Grapevine TX 76051

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

Name of Employer Occupation
D Marina Johnson, M.D. P.-A. Practice Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2011

Transaction ID: SA11AI.31472

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **10250.00**

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 35 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Julie Borden

Mailing Address 4106 Armistice Dr.

City Frisco State TX Zip Code 75034

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

Name of Employer Requested Occupation Marketing Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2011

Transaction ID: SA11AI.31274

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Peggy Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 28 / 2011

Transaction ID: SA11AI.31676

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Peggy Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 30 / 2011

Transaction ID: SA11AI.31675

Amount of Each Receipt this Period 5.00

SUBTOTAL of Receipts This Page (optional) ▶ 455.00

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 36 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Peggy Bost

Mailing Address 5107 Cerro Vista

City San Antonio State TX Zip Code 78233

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 04 / 11 / 2011
Transaction ID: SA11AI.36622
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Guy Bowers

Mailing Address P.O. Box 8090

City Ruidoso State NM Zip Code 88355

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 28 / 2011
Transaction ID: SA11AI.26486
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Phil Brand

Mailing Address 6066 Churchill Court

City Ketchikan State AK Zip Code 99901

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

Name of Employer State of Alaska Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 23 / 2011
Transaction ID: SA11AI.34714
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 5075.00

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 37 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Phil Brand

Mailing Address 6066 Churchill Court

City State Zip Code
Ketchikan AK 99901

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

Name of Employer State of Alaska Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2011

Transaction ID: SA11AI.38615

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
George Hugh Brandon

Mailing Address 1326 Black Oak Drive

City State Zip Code
Carrollton TX 75007

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

Name of Employer MDB Capital Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2011

Transaction ID: SA11AI.31260

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
David Brewer

Mailing Address 14314 Stanley Lane

City State Zip Code
Forney TX 75126

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

Name of Employer Gateway Petroleum Occupation Oil and Gas

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2011

Transaction ID: SA11AI.31344

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 38 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Pam Brewer

Mailing Address 14314 Stanley Lane

City Forney State TX Zip Code 75126

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

Name of Employer First Baptist Church Dallas Occupation Women's Minister

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2011
Transaction ID: SA11AI.31342
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Floyd Brown

Mailing Address 41620 N Shadow Creek Way

City Anthem State AZ Zip Code 85086

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

Name of Employer Excellentia Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 13 / 2011
Transaction ID: SA11AI.34509
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mark Brown

Mailing Address 2468 Eastwood Blvd.

City Prattville State AL Zip Code 36066

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

Name of Employer US Air Force Occupation Air Force Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 08 / 2011
Transaction ID: SA11AI.27150
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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 39 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Thomas Bryant

Mailing Address 7761 Farm to Market 592

City Wheeler State TX Zip Code 79096

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2011
Transaction ID: SA11AI.36703
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Robert Buckler

Mailing Address 2692 Mabry Rd. NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Troutman-Sanders Law Firm Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 14 / 2011
Transaction ID: SA11AI.26032
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Robert Buckler

Mailing Address 2692 Mabry Rd. NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Troutman-Sanders Law Firm Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 01 / 28 / 2011
Transaction ID: SA11AI.26033
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2200.00

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 40 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Jeremy Carrasco		Date of Receipt	
	Mailing Address 6216 Walling Lane		M M / D D / Y Y Y Y Y 03 / 31 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.31323
	Plano	TX	75093	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		300.00		
Name of Employer Self-Employed		Occupation Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) Angela Case		Date of Receipt	
	Mailing Address 700 Miller Ave.		M M / D D / Y Y Y Y Y 05 / 09 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.33678
	Great Falls	VA	22066	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		500.00		
Name of Employer Case Consulting/Arc Realty		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 625.00		

C.	Full Name (Last, First, Middle Initial) Philip Cavender		Date of Receipt	
	Mailing Address P. O. Box 1579		M M / D D / Y Y Y Y Y 02 / 06 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.27161
	Murfreesboro	TN	37133	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		5000.00		
Name of Employer The Cavender Financial Group, Inc.		Occupation Founder and CEO		
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)	▶	5800.00
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 41 / 236

(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

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
John Childs

Mailing Address 165 Sago Palm Rd.

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
J.W. Childs Associated, LP Investment Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.26069

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Sandra Click

Mailing Address 1284 Crabapple Rd.

City State Zip Code
Big Sandy TX 75755

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.96

Date of Receipt

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

Transaction ID: SA11AI.36363

Amount of Each Receipt this Period

20.12

C.

Full Name (Last, First, Middle Initial)
Sandra Click

Mailing Address 1284 Crabapple Rd.

City State Zip Code
Big Sandy TX 75755

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.36364

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

5045.12

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 42 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Sandra Click

Mailing Address 1284 Crabapple Rd.

City State Zip Code
Big Sandy TX 75755

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 256.08

Date of Receipt

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

Transaction ID: SA11AI.34303

Amount of Each Receipt this Period

20.12

B.

Full Name (Last, First, Middle Initial)
Sandra Click

Mailing Address 1284 Crabapple Rd.

City State Zip Code
Big Sandy TX 75755

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 276.20

Date of Receipt

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

Transaction ID: SA11AI.34304

Amount of Each Receipt this Period

20.12

C.

Full Name (Last, First, Middle Initial)
Sandra Click

Mailing Address 1284 Crabapple Rd.

City State Zip Code
Big Sandy TX 75755

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 296.32

Date of Receipt

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

Transaction ID: SA11AI.38153

Amount of Each Receipt this Period

20.12

SUBTOTAL of Receipts This Page (optional) ▶

60.36

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 43 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Sandra Click

Mailing Address 1284 Crabapple Rd.

City Big Sandy State TX Zip Code 75755

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.44

Date of Receipt 06 / 10 / 2011
Transaction ID: SA11AI.38154
Amount of Each Receipt this Period 20.12

B. Full Name (Last, First, Middle Initial)
Joshua Clinard

Mailing Address P.O. Box 15294

City Norfolk State VA Zip Code 23511

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

Name of Employer US Navy Occupation Quarter Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 26 / 2011
Transaction ID: SA11AI.29024
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Joshua Clinard

Mailing Address P.O. Box 15294

City Norfolk State VA Zip Code 23511

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

Name of Employer US Navy Occupation Quarter Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 07 / 2011
Transaction ID: SA11AI.33051
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 120.12

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 44 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Joshua Clinard		Date of Receipt
	Mailing Address P.O. Box 15294		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Norfolk	VA	23511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer US Navy		Occupation Quarter Master	Transaction ID: SA11AI.33050
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="325.00"/>	<input type="text" value="75.00"/>

B.	Full Name (Last, First, Middle Initial) Joshua Clinard		Date of Receipt
	Mailing Address P.O. Box 15294		<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Norfolk	VA	23511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer US Navy		Occupation Quarter Master	Transaction ID: SA11AI.33702
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="345.12"/>	<input type="text" value="20.12"/>

C.	Full Name (Last, First, Middle Initial) Joshua Clinard		Date of Receipt
	Mailing Address P.O. Box 15294		<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Norfolk	VA	23511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer US Navy		Occupation Quarter Master	Transaction ID: SA11AI.33701
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="420.12"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="170.12"/>
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 45 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Joshua Clinard

Mailing Address P.O. Box 15294

City State Zip Code
Norfolk VA 23511

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

Name of Employer Occupation
US Navy Quarter Master

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 495.12

Date of Receipt

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

Transaction ID: SA11AI.38371

Amount of Each Receipt this Period

75.00

B.

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

Mailing Address 6564 Valleybrook Drive

City State Zip Code
Dallas TX 75254

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

Name of Employer Occupation
Cooper Clinic Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11AI.36331

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Margaret Cooper

Mailing Address 2341 Glenview Dr

City State Zip Code
Freeport IL 61032

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.12

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.39696

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

1080.00

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 46 / 236
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Dianne Costa

Mailing Address 3119 Misty Oak

City Highland Village State TX Zip Code 75077

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

Name of Employer Self-Employed Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.31310

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Roy Covert

Mailing Address 3900 Tahoe Circle Drive

City Springdale State AR Zip Code 72762

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

Name of Employer Walmart Stores Inc. Occupation Director, Store Planning Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	1	1

Transaction ID: SA11AI.34237

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Paige Crosby

Mailing Address 17508 Oak Mount Place

City Dallas State TX Zip Code 75287

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.31395

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

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 47 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Scott Dacey

Mailing Address 139 Trent Shores Dr.

City State Zip Code
Trent Woods NC 28562

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2011

Transaction ID: SA11AI.33753

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gladys Deyns

Mailing Address 24 Dewey Place

City State Zip Code
Lindenhurst NY 11757

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

Name of Employer Nassau Health Care Corporation Occupation Administrative Assistant, Pediatrics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2011

Transaction ID: SA11AI.33547

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Gladys Deyns

Mailing Address 24 Dewey Place

City State Zip Code
Lindenhurst NY 11757

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

Name of Employer Nassau Health Care Corporation Occupation Administrative Assistant, Pediatrics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2011

Transaction ID: SA11AI.38783

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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 48 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.24

Date of Receipt
MM / DD / YYYY
05 / 24 / 2011

Transaction ID: SA11AI.33901

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.24

Date of Receipt
MM / DD / YYYY
05 / 24 / 2011

Transaction ID: SA11AI.33902

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.24

Date of Receipt
MM / DD / YYYY
05 / 24 / 2011

Transaction ID: SA11AI.33903

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 49 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.24

Date of Receipt
MM / DD / YYYY
06 / 24 / 2011

Transaction ID: SA11AI.38443

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.24

Date of Receipt
MM / DD / YYYY
06 / 24 / 2011

Transaction ID: SA11AI.38444

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.24

Date of Receipt
MM / DD / YYYY
06 / 24 / 2011

Transaction ID: SA11AI.38445

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 50 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.24

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.38446

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Evelyn Dodd

Mailing Address 8521 Winding Wood Drive

City State Zip Code
Port Richey FL 34668

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.24

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.39305

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)
Joshua Duggar

Mailing Address 1965 N. Porter Road

City State Zip Code
Springdale AR 72764

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

Name of Employer Occupation
Integrity Autopark Sales

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.26345

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

265.00

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 51 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Steve Dulin

Mailing Address 629 Saint James Pl.

City State Zip Code
Coppell TX 75019

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

Name of Employer Milestone Construction, Inc. Occupation Construction

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2011

Transaction ID: SA11AI.31262

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joe Elkins

Mailing Address 77810 Calle Temecula

City State Zip Code
La Quinta CA 92253

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

Name of Employer Vintage Associates, Inc. Occupation Payroll Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.34581

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Joe Elkins

Mailing Address 77810 Calle Temecula

City State Zip Code
La Quinta CA 92253

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

Name of Employer Vintage Associates, Inc. Occupation Payroll Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2011

Transaction ID: SA11AI.39535

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 575.00

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 52 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Ramona Elkins

Mailing Address 77810 Calle Temecula

City State Zip Code
La Quinta CA 92253

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

Name of Employer Occupation
Vintage Associates, Inc. Payroll Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.34580

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ramona Elkins

Mailing Address 77810 Calle Temecula

City State Zip Code
La Quinta CA 92253

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

Name of Employer Occupation
Vintage Associates, Inc. Payroll Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2011

Transaction ID: SA11AI.39536

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Gregg Esakoff

Mailing Address 810 Dakota Avenue

City State Zip Code
Whitefish MT 59937

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

Name of Employer Occupation
Self-Employed Consultant/Inventor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2011

Transaction ID: SA11AI.27622

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **575.00**

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 53 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Michael Fagan		Date of Receipt MM / DD / YYYY 05 / 09 / 2011
Mailing Address 4100 North Fairfax Drive Suite 200		Transaction ID: SA11AI.33682
City Arlington	State Zip Code VA 22203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Logan Technologies, Inc.	Occupation Chief Operating Officer	
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) Eugenia Farrow		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
Mailing Address 4555 Catina Ln.		Transaction ID: SA11AI.31377
City Dallas	State Zip Code TX 75229	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Engineer	
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) Robert Gears		Date of Receipt MM / DD / YYYY 04 / 18 / 2011
Mailing Address 3330 Lake Center Drive		Transaction ID: SA11AI.34793
City Mount Dora	State Zip Code FL 32757	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
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 54 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Charles Graves
 Mailing Address 7629 Densmore Avenue
 City Van Nuys State CA Zip Code 91406
 Date of Receipt 03 / 30 / 2011
Transaction ID: SA11AI.32072
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Graves Motorsports Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
Charles Graves
 Mailing Address 7629 Densmore Avenue
 City Van Nuys State CA Zip Code 91406
 Date of Receipt 04 / 30 / 2011
Transaction ID: SA11AI.37055
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Graves Motorsports Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 400.00

C. Full Name (Last, First, Middle Initial)
Charles Graves
 Mailing Address 7629 Densmore Avenue
 City Van Nuys State CA Zip Code 91406
 Date of Receipt 05 / 30 / 2011
Transaction ID: SA11AI.34561
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Graves Motorsports Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional) ► 300.00
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 55 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Charles Graves

Mailing Address 7629 Densmore Avenue

City State Zip Code
Van Nuys CA 91406

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

Name of Employer Occupation
Graves Motorsports Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2011

Transaction ID: SA11AI.39329

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Edward Hasley

Mailing Address 1416 Wood St

City State Zip Code
Texarkana TX 75501

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2011

Transaction ID: SA11AI.34292

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Edward Hasley

Mailing Address 1416 Wood St

City State Zip Code
Texarkana TX 75501

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2011

Transaction ID: SA11AI.34293

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 56 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Edward Hasley

Mailing Address 1416 Wood St

City State Zip Code
Texarkana TX 75501

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt

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

Transaction ID: SA11AI.38146

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Edward Hasley

Mailing Address 1416 Wood St

City State Zip Code
Texarkana TX 75501

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.38241

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mildred Heaton

Mailing Address P. O. Box 924

City State Zip Code
Crestview FL 32536

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

Name of Employer Mildred C. Heaton Realty, Inc. Occupation Real Estate Broker

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.26056

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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 57 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Mildred Heaton		Date of Receipt MM / DD / YYYY 02 / 27 / 2011
Mailing Address P. O. Box 924		Transaction ID: SA11AI.26965
City Crestview	State FL	Zip Code 32536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Mildred C. Heaton Realty, Inc.	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Mildred Heaton		Date of Receipt MM / DD / YYYY 03 / 08 / 2011
Mailing Address P. O. Box 924		Transaction ID: SA11AI.29486
City Crestview	State FL	Zip Code 32536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Mildred C. Heaton Realty, Inc.	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Mildred Heaton		Date of Receipt MM / DD / YYYY 03 / 27 / 2011
Mailing Address P. O. Box 924		Transaction ID: SA11AI.29487
City Crestview	State FL	Zip Code 32536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Mildred C. Heaton Realty, Inc.	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	100.00
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 58 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Mildred Heaton

Mailing Address P. O. Box 924

City State Zip Code
Crestview FL 32536

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

Name of Employer
Mildred C. Heaton Realty, Inc.

Occupation
Real Estate Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
04 / 08 / 2011

Transaction ID: SA11AI.34762

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mildred Heaton

Mailing Address P. O. Box 924

City State Zip Code
Crestview FL 32536

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

Name of Employer
Mildred C. Heaton Realty, Inc.

Occupation
Real Estate Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2011

Transaction ID: SA11AI.34763

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mildred Heaton

Mailing Address P. O. Box 924

City State Zip Code
Crestview FL 32536

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

Name of Employer
Mildred C. Heaton Realty, Inc.

Occupation
Real Estate Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2011

Transaction ID: SA11AI.33837

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 59 / 236
(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

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Mildred Heaton		Date of Receipt MM / DD / YYYY 05 / 27 / 2011
Mailing Address P. O. Box 924		Transaction ID: SA11AI.33838
City Crestview	State FL	Zip Code 32536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Mildred C. Heaton Realty, Inc.	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

B.

Full Name (Last, First, Middle Initial) Mildred Heaton		Date of Receipt MM / DD / YYYY 06 / 27 / 2011
Mailing Address P. O. Box 924		Transaction ID: SA11AI.38764
City Crestview	State FL	Zip Code 32536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Mildred C. Heaton Realty, Inc.	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Margaret Anne Hicks		Date of Receipt MM / DD / YYYY 06 / 22 / 2011
Mailing Address 586 Fairwood Drive		Transaction ID: SA11AI.38696
City Tallmadge	State OH	Zip Code 44278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	75.00
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 60 / 236
(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			

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Ewald Hueffmeier

Mailing Address 421 Quail Run Ct.

City Monterey State CA Zip Code 93940

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

Name of Employer ATK Occupation Design Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11AI.37199

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Ewald Hueffmeier

Mailing Address 421 Quail Run Ct.

City Monterey State CA Zip Code 93940

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

Name of Employer ATK Occupation Design Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: SA11AI.37201

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Ewald Hueffmeier

Mailing Address 421 Quail Run Ct.

City Monterey State CA Zip Code 93940

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

Name of Employer ATK Occupation Design Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	1	1

Transaction ID: SA11AI.38473

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 61 / 236
(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

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Jimmy Humphrey

Mailing Address 2200 Potomac Dr.

City State Zip Code
Houston TX 77057

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

Name of Employer Occupation
Enjet Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2011

Transaction ID: SA11AI.38268

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Jimmy Humphrey

Mailing Address 2200 Potomac Dr.

City State Zip Code
Houston TX 77057

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

Name of Employer Occupation
Enjet Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2011

Transaction ID: SA11AI.38744

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Jimmy Humphrey

Mailing Address 2200 Potomac Dr.

City State Zip Code
Houston TX 77057

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

Name of Employer Occupation
Enjet Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2011

Transaction ID: SA11AI.38745

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 55.00

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 62 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Jimmy Humphrey
Mailing Address 2200 Potomac Dr.
City State Zip Code
Houston TX 77057
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Enjet Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00
Date of Receipt: 06 / 23 / 2011
Transaction ID: SA11AI.38561
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Christopher Hunt
Mailing Address 1920 Anastasia lane
City State Zip Code
Atlanta GA 30341
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed General Contractor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt: 06 / 16 / 2011
Transaction ID: SA11AI.38284
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Kyungae Kim
Mailing Address 19486 E 58th Cir
City State Zip Code
Aurora CO 80019
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
University of Colorado Ho-
spital MLS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt: 04 / 05 / 2011
Transaction ID: SA11AI.36757
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 255.00
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 63 / 236
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Kyungae Kim

Mailing Address 19486 E 58th Cir

City Aurora State CO Zip Code 80019

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

Name of Employer University of Colorado Hospital Occupation MLS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 05 / 11 / 2011
Transaction ID: SA11AI.34447
 Amount of Each Receipt this Period: 50.00

B.

Full Name (Last, First, Middle Initial)
Kyungae Kim

Mailing Address 19486 E 58th Cir

City Aurora State CO Zip Code 80019

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

Name of Employer University of Colorado Hospital Occupation MLS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 06 / 14 / 2011
Transaction ID: SA11AI.38259
 Amount of Each Receipt this Period: 30.00

C.

Full Name (Last, First, Middle Initial)
Randy King

Mailing Address 4400 Rheims Place

City Dallas State TX Zip Code 75205

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

Name of Employer Self-Employed Occupation Energy Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 31 / 2011
Transaction ID: SA11AI.31361
 Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ► 2580.00

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 64 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.36104

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.34235

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Larry Kirk

Mailing Address 905 Jefferson

City Berryville State AR Zip Code 72616

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

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

Transaction ID: SA11AI.38944

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 65 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Bob Koenig
 Mailing Address 180 Greenfield Drive
 City State Zip Code
 Carencro LA 70520
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 3 / 2 0 1 1
Transaction ID: SA11AI.34208
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Andrew Coaching Leadership Coach
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
Andrew Komarek
 Mailing Address 2033 Turk Hill Rd
 City State Zip Code
 Fairport NY 14450
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 1 1
Transaction ID: SA11AI.33555
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ANKOM Technology President
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

C. Full Name (Last, First, Middle Initial)
Richard Kund
 Mailing Address 2713 Carrell La
 City State Zip Code
 Willow Grove PA 19090
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 3 1 / 2 0 1 1
Transaction ID: SA11AI.33622
 Amount of Each Receipt this Period
 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00
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 66 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
David Landers

Mailing Address 1751 North Walnut Road

City State Zip Code
Rochester IL 62563

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

Name of Employer Occupation
Illinois Principals Assc. Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -40.00

Date of Receipt
MM / DD / YYYY
01 / 24 / 2011

Transaction ID: SA11AI.26268

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
David Landers

Mailing Address 1751 North Walnut Road

City State Zip Code
Rochester IL 62563

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

Name of Employer Occupation
Illinois Principals Assc. Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -30.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI.27673

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
David Landers

Mailing Address 1751 North Walnut Road

City State Zip Code
Rochester IL 62563

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

Name of Employer Occupation
Illinois Principals Assc. Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -20.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2011

Transaction ID: SA11AI.30732

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 67 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
David Landers
 Mailing Address 1751 North Walnut Road
 City State Zip Code
 Rochester IL 62563
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 1 1
Transaction ID: SA11AI.35740
 Amount of Each Receipt this Period
 10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Illinois Principals Assc. Requested
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -10.00

B. Full Name (Last, First, Middle Initial)
Caroline Lewis
 Mailing Address 3750 Duchess Trail
 City State Zip Code
 Dallas TX 75229
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 5 / 2 0 1 1
Transaction ID: SA11AI.36319
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Communications
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

C. Full Name (Last, First, Middle Initial)
James K. Lewis
 Mailing Address 3750 Duchess Trail
 City State Zip Code
 Dallas TX 75229
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 2 / 2 0 1 1
Transaction ID: SA11AI.36317
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Consultant
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

SUBTOTAL of Receipts This Page (optional) ► 4510.00
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 68 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
James K. Lewis
 Mailing Address 3750 Duchess Trail
 City State Zip Code
 Dallas TX 75229
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 1 1
Transaction ID: SA11AI.34285
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation
 Self-Employed Consultant
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 5000.00

B. Full Name (Last, First, Middle Initial)
Mary Libla
 Mailing Address HC 1, Box 800
 City State Zip Code
 Fairdealing MO 63939
 Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 1 2 / 2 0 1 1
Transaction ID: SA11AI.26272
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Requested
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 5000.00

C. Full Name (Last, First, Middle Initial)
Shelby Lorenzen
 Mailing Address 3941 Nikita Drive
 City State Zip Code
 Hope Mills NC 28348
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 7 / 2 0 1 1
Transaction ID: SA11AI.33747
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Homemaker
 Homemaker
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 250.00

SUBTOTAL of Receipts This Page (optional) ► 7550.00
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 69 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Shelby Lorenzen

Mailing Address 3941 Nikita Drive

City Hope Mills State NC Zip Code 28348

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2011

Transaction ID: SA11AI.40283

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
John Macek

Mailing Address 3449 E Easter Place

City Centennial State CO Zip Code 80122

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 29 / 2011

Transaction ID: SA11AI.34451

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Michael Martin

Mailing Address 1710 Grouse Ct.

City Abilene State TX Zip Code 79605

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

Name of Employer USAF Occupation Aircraft Technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 22 / 2011

Transaction ID: SA11AI.34436

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 70 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Michael Martin

Mailing Address 1710 Grouse Ct.

City Abilene State TX Zip Code 79605

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

Name of Employer USAF Occupation Aircraft Technician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 22 / 2011
Transaction ID: SA11AI.38720
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Gilbert A. Mathews

Mailing Address P.O. Box 911

City Burnsville State MN Zip Code 55337

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 11 / 2011
Transaction ID: SA11AI.27557
 Amount of Each Receipt this Period: 250.00

C.

Full Name (Last, First, Middle Initial)
Gilbert A. Mathews

Mailing Address P.O. Box 911

City Burnsville State MN Zip Code 55337

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 02 / 24 / 2011
Transaction ID: SA11AI.27558
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 450.00

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 71 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Gilbert A. Mathews

Mailing Address P.O. Box 911

City State Zip Code
Burnsville MN 55337

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.30508

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Susan McCarthy

Mailing Address 529 Turtle Creek Court

City State Zip Code
O'Fallon IL 62269

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

Name of Employer Occupation
Family Physicians of O'Fallon Medical Records Clerk

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.35738

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Susan McCarthy

Mailing Address 529 Turtle Creek Court

City State Zip Code
O'Fallon IL 62269

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

Name of Employer Occupation
Family Physicians of O'Fallon Medical Records Clerk

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.34172

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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 72 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Susan McCarthy
 Mailing Address 529 Turtle Creek Court
 City O'Fallon State IL Zip Code 62269
 Date of Receipt 05 / 24 / 2011
Transaction ID: SA11AI.34170
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Family Physicians of O'Fallon Occupation: Medical Records Clerk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 275.00

B. Full Name (Last, First, Middle Initial)
Susan McCarthy
 Mailing Address 529 Turtle Creek Court
 City O'Fallon State IL Zip Code 62269
 Date of Receipt 05 / 24 / 2011
Transaction ID: SA11AI.34171
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Family Physicians of O'Fallon Occupation: Medical Records Clerk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

C. Full Name (Last, First, Middle Initial)
Susan McCarthy
 Mailing Address 529 Turtle Creek Court
 City O'Fallon State IL Zip Code 62269
 Date of Receipt 06 / 25 / 2011
Transaction ID: SA11AI.38392
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Family Physicians of O'Fallon Occupation: Medical Records Clerk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 325.00

SUBTOTAL of Receipts This Page (optional) ► 75.00
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 73 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Susan McCarthy

Mailing Address 529 Turtle Creek Court

City State Zip Code
O'Fallon IL 62269

FEC ID number of contributing federal political committee. C

Name of Employer: Family Physicians of O'Fallon
Occupation: Medical Records Clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 25 / 2011

Transaction ID: SA11AI.38393

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Rickey McCrary

Mailing Address 1811 Masters Dr.

City State Zip Code
Desoto TX 75115

FEC ID number of contributing federal political committee. C

Name of Employer: Self-Employed
Occupation: Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2011

Transaction ID: SA11AI.31338

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City State Zip Code
Stanhope NJ 07874

FEC ID number of contributing federal political committee. C

Name of Employer: Requested
Occupation: Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 21 / 2011

Transaction ID: SA11AI.40646

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 625.00

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 74 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 02 / 26 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.40664
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 02 / 27 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.40665
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 03 / 21 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.32726
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 75 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: MM / DD / YYYY
03 / 21 / 2011

Transaction ID: SA11AI.32728

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: MM / DD / YYYY
03 / 21 / 2011

Transaction ID: SA11AI.32729

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: MM / DD / YYYY
03 / 21 / 2011

Transaction ID: SA11AI.32730

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

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 76 / 236
(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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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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 03 / 26 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.32731
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

B.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 03 / 27 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.32732
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

C.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 04 / 21 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.33504
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 77 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee. C

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI.33505

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee. C

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

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

Transaction ID: SA11AI.33506

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

FEC ID number of contributing federal political committee. C

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

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

Transaction ID: SA11AI.33507

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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 78 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road
#1

City State Zip Code
Stanhope NJ 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.33508

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road
#1

City State Zip Code
Stanhope NJ 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.33509

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road
#1

City State Zip Code
Stanhope NJ 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

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

Transaction ID: SA11AI.34736

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

100.00

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 79 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 06 / 23 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.38616
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

B.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 06 / 23 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.38617
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

C.

Full Name (Last, First, Middle Initial) Spencer McKiernan		Date of Receipt MM / DD / YYYY 06 / 23 / 2011
Mailing Address 35 Beverly Road #1		Transaction ID: SA11AI.38618
City Stanhope	State NJ	Zip Code 07874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

SUBTOTAL of Receipts This Page (optional)	75.00
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 80 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 06 / 23 / 2011
Transaction ID: SA11AI.38619
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Spencer McKiernan

Mailing Address 35 Beverly Road #1

City Stanhope State NJ Zip Code 07874

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 06 / 26 / 2011
Transaction ID: SA11AI.38372
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
M. Myers Mermel

Mailing Address 375 Park Avenue Suite 2402

City New York State NY Zip Code 10152

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

Name of Employer Mermel & McLain Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 07 / 2011
Transaction ID: SA11AI.25928
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5075.00

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 81 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Anne Miller
 Mailing Address 6274 Willowgate
 City State Zip Code
 Dallas TX 75230
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 1 1
Transaction ID: SA11AI.36323
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Homemaker Homemaker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

B. Full Name (Last, First, Middle Initial)
Norman Miller
 Mailing Address 6274 Willowgate
 City State Zip Code
 Dallas TX 75230
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 1 1
Transaction ID: SA11AI.36321
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Interstate Batteries Chairman
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

C. Full Name (Last, First, Middle Initial)
Marty Morehouse
 Mailing Address 301 Wilcrest 4307
 City State Zip Code
 Houston TX 77042
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 3 1 / 2 0 1 1
Transaction ID: SA11AI.34335
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 R. G. Miller Engineers Engineer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

SUBTOTAL of Receipts This Page (optional) ► 10025.00
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 82 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Naomi Needham

Mailing Address 7210 SW 93rd St.

City State Zip Code
Wakarusa KS 66546

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

Name of Employer Occupation
Industrial Chrome Secretary/Treasurer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.35883

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
James Neff

Mailing Address 23988 Zion Ave. P.O.Box 189
P.O.Box 189

City State Zip Code
Winsted MN 55395

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.38740

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Kristi Nimmo

Mailing Address 9940 Westgate Court

City State Zip Code
Lenexa KS 66215

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

Name of Employer Occupation
Mortgage Lenders of America Loan Officer

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

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 1 1

Transaction ID: SA11AI.30870

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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 83 / 236
(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

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Douglas Oines

Mailing Address 1280 Taylorsville Road

City Washington Crossin State PA Zip Code 18977

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

Name of Employer Clearview Cinemas Occupation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.26680

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Jean Overton

Mailing Address 1735 Meiers Ct. N.W.

City Cedar Rapids State IA Zip Code 52405

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.30442

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Jean Overton

Mailing Address 1735 Meiers Ct. N.W.

City Cedar Rapids State IA Zip Code 52405

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.35521

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 84 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Jean Overton
Mailing Address 1735 Meiers Ct. N.W.
City Cedar Rapids State IA Zip Code 52405
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 04 / 25 / 2011
Transaction ID: SA11AI.35522
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Jean Overton
Mailing Address 1735 Meiers Ct. N.W.
City Cedar Rapids State IA Zip Code 52405
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 05 / 25 / 2011
Transaction ID: SA11AI.34092
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Tim Owen
Mailing Address 5261 N Williams Road
City Saint Johns State MI Zip Code 48879
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertafore, Inc. Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 06 / 05 / 2011
Transaction ID: SA11AI.38037
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 200.00
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 85 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Jennifer Packer
Mailing Address 1239 Veeder Drive
City State Zip Code
Hewlett NY 11557
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 03 / 07 / 2011
Transaction ID: SA11AI.40686
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Paul Packer
Mailing Address 1239 Veeder Dr.
City State Zip Code
Hewlett NY 11557
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation
Globis Capital Advisors
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 03 / 07 / 2011
Transaction ID: SA11AI.28664
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Star Parker
Mailing Address 107 W. Marquita
City State Zip Code
San Clemente CA 92672
FEC ID number of contributing federal political committee. **C**
Name of Employer Center for Urban Renewal & Edu Occupation
President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 05 / 09 / 2011
Transaction ID: SA11AI.34605
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 86 / 236
(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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Betty Payne
Mailing Address P.O. Box 1289
City Rowlett State TX Zip Code 75030
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 30 / 2011
Transaction ID: SA11AI.31272
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Kristin Pelphrey
Mailing Address 5765 Bozeman No. 2201
City Plano State TX Zip Code 75024
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 31 / 2011
Transaction ID: SA11AI.31268
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Gregory Poe
Mailing Address 675 East Street NW Apt. 310
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 05 / 09 / 2011
Transaction ID: SA11AI.34753
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00
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 87 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Gregory Prunier

Mailing Address 20432 Greenfield Road

City State Zip Code
Germantown MD 20876

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.32959

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Wade Pulliam

Mailing Address 1401 N. Taft St.
Apt. 1027

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Logos Technologies Engineer

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.33680

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Ann Quest

Mailing Address 5609 Ursula Ln.

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation
Self-Employed Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

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

Transaction ID: SA11AI.31375

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

3100.00

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 88 / 236
(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

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Jerry Rains

Mailing Address 430 Kyllie Drive

City Millington State TN Zip Code 38053

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

Name of Employer All American Moving Group, LLC
Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.35064

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Jerry Rains

Mailing Address 430 Kyllie Drive

City Millington State TN Zip Code 38053

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

Name of Employer All American Moving Group, LLC
Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11AI.33945

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Jerry Rains

Mailing Address 430 Kyllie Drive

City Millington State TN Zip Code 38053

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

Name of Employer All American Moving Group, LLC
Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11AI.33946

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 89 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Arline Ramon	Date of Receipt MM / DD / YYYY 05 / 03 / 2011
	Mailing Address 2140 Grandview Court	Transaction ID: SA11AI.34275
	City State Zip Code Cedar Hill TX 75104	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B.	Full Name (Last, First, Middle Initial) M. Brian Ramon	Date of Receipt MM / DD / YYYY 03 / 25 / 2011
	Mailing Address 2140 Grandview Court	Transaction ID: SA11AI.31327
	City State Zip Code Cedar Hill TX 75104	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MBRGFR Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) M. Brian Ramon	Date of Receipt MM / DD / YYYY 05 / 03 / 2011
	Mailing Address 2140 Grandview Court	Transaction ID: SA11AI.34277
	City State Zip Code Cedar Hill TX 75104	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MBRGFR Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
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 90 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Eugene Rhodes
 Mailing Address 3900 Park Green Drive
 City State Zip Code
 Corona Del Mar CA 92625
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 1 1
Transaction ID: SA11AI.32170
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rhodes Development Co. Occupation Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

B. Full Name (Last, First, Middle Initial)
Eugene Rhodes
 Mailing Address 3900 Park Green Drive
 City State Zip Code
 Corona Del Mar CA 92625
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 1 1
Transaction ID: SA11AI.37129
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rhodes Development Co. Occupation Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

C. Full Name (Last, First, Middle Initial)
Eugene Rhodes
 Mailing Address 3900 Park Green Drive
 City State Zip Code
 Corona Del Mar CA 92625
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 8 / 2 0 1 1
Transaction ID: SA11AI.34597
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rhodes Development Co. Occupation Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) ► 300.00
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 91 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Keresa Richardson
Mailing Address 2102 Augusta
City State Zip Code
McKinney TX 75070
FEC ID number of contributing federal political committee. **C**
Name of Employer Ben Franklin Plumbing Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 04 / 26 / 2011
Transaction ID: SA11AI.36282
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Richard Rock
Mailing Address 1154 Nevada Avenue
City State Zip Code
San Jose CA 95125
FEC ID number of contributing federal political committee. **C**
Name of Employer The CAPROCK Group Occupation Financial Advisor
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 02 / 11 / 2011
Transaction ID: SA11AI.28419
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Richard Rock
Mailing Address 1154 Nevada Avenue
City State Zip Code
San Jose CA 95125
FEC ID number of contributing federal political committee. **C**
Name of Employer The CAPROCK Group Occupation Financial Advisor
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 05 / 31 / 2011
Transaction ID: SA11AI.34644
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00
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 92 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial) James Sammons		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
Mailing Address 4200 S. Hulen Ste. 530		Transaction ID: SA11AI.31487
City Fort Worth	State TX	Zip Code 76109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self-Employed	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.

Full Name (Last, First, Middle Initial) Joan Schmidt		Date of Receipt MM / DD / YYYY 04 / 18 / 2011
Mailing Address 4506 Providence Point Place SE		Transaction ID: SA11AI.37363
City Issaquah	State WA	Zip Code 98029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Joan Schmidt		Date of Receipt MM / DD / YYYY 04 / 30 / 2011
Mailing Address 4506 Providence Point Place SE		Transaction ID: SA11AI.37364
City Issaquah	State WA	Zip Code 98029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
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)	6000.00
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 93 / 236
(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

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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Joel Sears

Mailing Address 4014 Olmsted

City State Zip Code
Spokane WA 99223

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

Name of Employer Occupation
Joel Sears Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2011

Transaction ID: SA11AI.32497

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
George Shafer

Mailing Address 11711 Forest Ct.

City State Zip Code
Dallas TX 75230

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

Name of Employer Occupation
Self-Employed Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2011

Transaction ID: SA11AI.31381

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Roger Sherman

Mailing Address 1124 12th Ave NW

City State Zip Code
Arab AL 35016

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

Name of Employer Occupation
Lockheed Martin Space Systems Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2011

Transaction ID: SA11AI.34966

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 94 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Roger Sherman
 Mailing Address 1124 12th Ave NW
 City Arab State AL Zip Code 35016
 Date of Receipt 05 / 05 / 2011
Transaction ID: SA11AI.33915
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lockheed Martin Space Systems Occupation Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 400.00

B. Full Name (Last, First, Middle Initial)
Roger Sherman
 Mailing Address 1124 12th Ave NW
 City Arab State AL Zip Code 35016
 Date of Receipt 06 / 05 / 2011
Transaction ID: SA11AI.38025
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lockheed Martin Space Systems Occupation Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

C. Full Name (Last, First, Middle Initial)
John Shields
 Mailing Address 817 Lancelot Circle
 City Collierville State TN Zip Code 38017
 Date of Receipt 05 / 17 / 2011
Transaction ID: SA11AI.33944
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional) ► 700.00
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 95 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Carmen Smallwood

Mailing Address 18824 Townline Road

City Mokena State IL Zip Code 60448

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

Name of Employer Unemployed Occupation Unemployed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 06 / 24 / 2011
Transaction ID: SA11AI.38441
Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
Carmen Smallwood

Mailing Address 18824 Townline Road

City Mokena State IL Zip Code 60448

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

Name of Employer Unemployed Occupation Unemployed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 24 / 2011
Transaction ID: SA11AI.38442
Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Jim Smith

Mailing Address 300 Glencoe Street

City Denver State CO Zip Code 80220

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

Name of Employer Self-Employed Occupation Serial Entrepreneur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 04 / 2011
Transaction ID: SA11AI.31795
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5050.00

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 96 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Linda Smith
Mailing Address 113 Island Ave
City Buckhannon State WV Zip Code 26201
FEC ID number of contributing federal political committee. **C**
Name of Employer Riverside Bed & Breakfast Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.12
Date of Receipt 03 / 24 / 2011
Transaction ID: SA11AI.29075
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Linda Smith
Mailing Address 113 Island Ave
City Buckhannon State WV Zip Code 26201
FEC ID number of contributing federal political committee. **C**
Name of Employer Riverside Bed & Breakfast Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.12
Date of Receipt 04 / 12 / 2011
Transaction ID: SA11AI.33097
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Donald Spence
Mailing Address 1728 Manor Lane
City Plano State TX Zip Code 75093
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt 03 / 31 / 2011
Transaction ID: SA11AI.31321
Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 2200.00
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 97 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Neil Steiner</p> <p>Mailing Address 7598 Lakeside Village Drive Apt I</p> <p>City Falls Church State VA Zip Code 22042</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Univ. of Southern California Occupation: Researcher</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 05 / 2011</p> <p>Transaction ID: SA11AI.33675</p> <p>Amount of Each Receipt this Period 50.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) William Stephens</p> <p>Mailing Address 6724 Princess Anne Lane</p> <p>City Falls Church State VA Zip Code 22042</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Requested</p> <p>Occupation Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 09 / 2011</p> <p>Transaction ID: SA11AI.33677</p> <p>Amount of Each Receipt this Period 500.00</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Darlene Stevens</p> <p>Mailing Address 46073 Buells Crns Road</p> <p>City Spartansburg State PA Zip Code 16434</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: T.J.Hicks Lumber Co. Occupation: Office Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 01 / 2011</p> <p>Transaction ID: SA11AI.33593</p> <p>Amount of Each Receipt this Period 50.00</p>
--	---

SUBTOTAL of Receipts This Page (optional)	600.00
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 98 / 236

(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Darlene Stevens

Mailing Address 46073 Buells Crns Road

City State Zip Code
Spartansburg PA 16434

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

Name of Employer Occupation
T.J.Hicks Lumber Co. Office Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2011

Transaction ID: SA11AI.37915

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Louis Stevens

Mailing Address 1415 Wilderness Road

City State Zip Code
West Palm Beach FL 33409

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

Name of Employer Occupation
Cheney Brothers, Inc. Sales Analyst/Trainer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 17 / 2011

Transaction ID: SA11AI.27033

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mike Swaim

Mailing Address 1907 Baker Rd.

City State Zip Code
High Point NC 27263

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

Name of Employer Occupation
Management Resource Systems, Inc. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 30 / 2011

Transaction ID: SA11AI.33117

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

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 99 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Judith Taber
Mailing Address 1421 Brighton Street
City State Zip Code
La Habra CA 90631
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Century 21 Discovery Realtor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 06 / 30 / 2011
Transaction ID: SA11AI.39720
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Susan Thomas-Williams
Mailing Address 867 Main Street
City State Zip Code
Gibbsland LA 71028
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Timber And Investments
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt: 06 / 29 / 2011
Transaction ID: SA11AI.39236
Amount of Each Receipt this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
Beverly Volentine
Mailing Address 978 Tulip Rd.
City State Zip Code
Athens LA 71003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Farm Co-Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt: 04 / 10 / 2011
Transaction ID: SA11AI.35999
Amount of Each Receipt this Period: 5.00

SUBTOTAL of Receipts This Page (optional) ► 1755.00
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 100 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Amy Walker

Mailing Address 8690 E Highlands Circle

City Palmer State AK Zip Code 99645

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

Name of Employer Self-Employed Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 06 / 10 / 2011

Transaction ID: SA11AI.38151

Amount of Each Receipt this Period: 12.00

B.

Full Name (Last, First, Middle Initial)
Amy Walker

Mailing Address 8690 E Highlands Circle

City Palmer State AK Zip Code 99645

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

Name of Employer Self-Employed Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt: 06 / 10 / 2011

Transaction ID: SA11AI.38152

Amount of Each Receipt this Period: 12.00

C.

Full Name (Last, First, Middle Initial)
Amy Walker

Mailing Address 8690 E Highlands Circle

City Palmer State AK Zip Code 99645

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

Name of Employer Self-Employed Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.00

Date of Receipt: 06 / 22 / 2011

Transaction ID: SA11AI.38721

Amount of Each Receipt this Period: 12.00

SUBTOTAL of Receipts This Page (optional) ► 36.00

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 101 / 236
	<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Amy Walker		Date of Receipt
	Mailing Address 8690 E Highlands Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2011
	City	State	Zip Code
	Palmer	AK	99645
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39530
Name of Employer Self-Employed		Occupation Sales	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 ▼ 249.12	<input type="text"/> 20.12

B.	Full Name (Last, First, Middle Initial) Jessica Watson		Date of Receipt
	Mailing Address 106 Cypress Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 07 / 2011
	City	State	Zip Code
	Wrightsville Beach	NC	28480
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.29176
Name of Employer Self-Employed		Occupation Independent Investor	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"/> 500.00

C.	Full Name (Last, First, Middle Initial) Anita Wells		Date of Receipt
	Mailing Address 3606 Reynolds Park Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 31 / 2011
	City	State	Zip Code
	Paragould	AR	72450
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.34229
Name of Employer Mid South Health Systems		Occupation Psychologist	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 ▼ 250.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 570.12
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 102 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Anita Wells

Mailing Address 3606 Reynolds Park Road

City State Zip Code
Paragould AR 72450

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

Name of Employer Occupation
Mid South Health Systems Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2011

Transaction ID: SA11AI.38715

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Maxine Wilson

Mailing Address 137 Walnut Hill Dr SE

City State Zip Code
Calhoun GA 30701

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.76

Date of Receipt
MM / DD / YYYY
05 / 16 / 2011

Transaction ID: SA11AI.33804

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Maxine Wilson

Mailing Address 137 Walnut Hill Dr SE

City State Zip Code
Calhoun GA 30701

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.76

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: SA11AI.33805

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 103 / 236
(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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Maxine Wilson

Mailing Address 137 Walnut Hill Dr SE

City Calhoun State GA Zip Code 30701

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.76

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.33806

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Maxine Wilson

Mailing Address 137 Walnut Hill Dr SE

City Calhoun State GA Zip Code 30701

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.76

Date of Receipt
MM / DD / YYYY
06 / 19 / 2011

Transaction ID: SA11AI.38351

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Maxine Wilson

Mailing Address 137 Walnut Hill Dr SE

City Calhoun State GA Zip Code 30701

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.76

Date of Receipt
MM / DD / YYYY
06 / 23 / 2011

Transaction ID: SA11AI.38540

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 104 / 236
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Maxine Wilson

Mailing Address 137 Walnut Hill Dr SE

City State Zip Code
Calhoun GA 30701

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 269.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	1

Transaction ID: SA11AI.39513

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Lisa Young-Prendergast

Mailing Address 1224 Cedar Place

City State Zip Code
Davis CA 95616

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

Name of Employer TPMG Occupation Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.38374

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Roy Zaloom

Mailing Address 222 Nottingham Road

City State Zip Code
Ramsey NJ 07446

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

Name of Employer Zaloom Marketing Corp. Occupation CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	1	1

Transaction ID: SA11AI.33493

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	280.00
TOTAL This Period (last page this line number only)	127433.92

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 236
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
AMERICANS IN CONTACT PAC

Mailing Address PO BOX 204

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00455444

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY
05 / 09 / 2011

Transaction ID: SA11C.33642

Amount of Each Receipt this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
CITIZENS UNITED POLITICAL VICTORY FUND

Mailing Address 1006 PENNSYLVANIA AVE SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
05 / 09 / 2011

Transaction ID: SA11C.33632

Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
GOVERNMENT IS NOT GOD

Mailing Address PO BOX 77237

City State Zip Code
WASHINGTON DC 20013

FEC ID number of contributing federal political committee. **C** C00297531

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
05 / 03 / 2011

Transaction ID: SA11C.40486

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 8000.00

TOTAL This Period (last page this line number only) ► 8000.00

**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)

PAGE 106 / 236

<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) 5 Oaks Duck Lodge Mailing Address 1895 Highway 152 City Humphrey State AR Zip Code 72073 Purpose of Disbursement Fundraising Event Expense 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) ▼	Transaction ID: SB21B.4368 Date of Disbursement 01 / 06 / 2011 Amount of Each Disbursement this Period 19648.00 Category/Type
B.	Full Name (Last, First, Middle Initial) American Caging Mailing Address 4850 Wright Road Suite 168 City Stafford State TX Zip Code 77477-4114 Purpose of Disbursement Direct Mail Caging Services 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) ▼	Transaction ID: SB21B.4319 Date of Disbursement 03 / 03 / 2011 Amount of Each Disbursement this Period 770.00 Category/Type
C.	Full Name (Last, First, Middle Initial) American Caging Mailing Address 4850 Wright Road Suite 168 City Stafford State TX Zip Code 77477-4114 Purpose of Disbursement Direct Mail Caging Services 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) ▼	Transaction ID: SB21B.4348 Date of Disbursement 04 / 15 / 2011 Amount of Each Disbursement this Period 745.59 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

21163.59

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) American Caging</p> <p>Mailing Address 4850 Wright Road Suite 168</p> <p>City Stafford State TX Zip Code 77477-4114</p> <p>Purpose of Disbursement Direct Mail Caging Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4429</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="11"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="74.35"/></p>
<p>B. Full Name (Last, First, Middle Initial) Apptix DBA MailStreet</p> <p>Mailing Address Dept. CH19172</p> <p>City Palatine State IL Zip Code 60055</p> <p>Purpose of Disbursement Blackberry Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4284</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="11"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="296.62"/></p>
<p>C. Full Name (Last, First, Middle Initial) Apptix DBA MailStreet</p> <p>Mailing Address Dept. CH19172</p> <p>City Palatine State IL Zip Code 60055</p> <p>Purpose of Disbursement Blackberry Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4349</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="11"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="122.43"/></p>

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Apptix DBA MailStreet	Transaction ID: SB21B.4447
	Mailing Address Dept. CH19172	Date of Disbursement MM / DD / YYYY 05 / 16 / 2011
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 122.43
	Purpose of Disbursement Blackberry Service	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) Apptix DBA MailStreet	Transaction ID: SB21B.37707
	Mailing Address Dept. CH19172	Date of Disbursement MM / DD / YYYY 06 / 20 / 2011
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period 122.43
	Purpose of Disbursement Blackberry Service	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) AT&T	Transaction ID: SB21B.4131
	Mailing Address PO Box 650661	Date of Disbursement MM / DD / YYYY 01 / 06 / 2011
	City Dallas State TX Zip Code 75265	Amount of Each Disbursement this Period 320.33
	Purpose of Disbursement Telephone Service	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)	▶	565.19
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 650661 City Dallas State TX Zip Code 75265 Purpose of Disbursement Telephone Service 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) ▼	Transaction ID: SB21B.4201 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 1 1	Amount of Each Disbursement this Period 322.76
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 650661 City Dallas State TX Zip Code 75265 Purpose of Disbursement Telephone Service 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) ▼	Transaction ID: SB21B.4259 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 1 1	Amount of Each Disbursement this Period 321.92
C.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 650661 City Dallas State TX Zip Code 75265 Purpose of Disbursement Telephone Service 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) ▼	Transaction ID: SB21B.4331 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1	Amount of Each Disbursement this Period 321.92

SUBTOTAL of Disbursements This Page (optional)	966.60
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 650661 City Dallas State TX Zip Code 75265 Purpose of Disbursement Telephone Service 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) ▼	Transaction ID: SB21B.4428 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 1 1	Amount of Each Disbursement this Period 321.37
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 650661 City Dallas State TX Zip Code 75265 Purpose of Disbursement Telephone Service 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) ▼	Transaction ID: SB21B.37682 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 1 1	Amount of Each Disbursement this Period 368.08
C.	Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Telephone Service 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) ▼	Transaction ID: SB21B.4158 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 1 1	Amount of Each Disbursement this Period 208.72

SUBTOTAL of Disbursements This Page (optional) ▶

898.17

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB21B.4228 Date of Disbursement
	Mailing Address PO Box 6463	<input type="text" value="02"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Service	<input type="text" value="203.91"/>
	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) AT&T Mobility	Transaction ID: SB21B.4283 Date of Disbursement
	Mailing Address PO Box 6463	<input type="text" value="03"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Service	<input type="text" value="193.70"/>
	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) AT&T Mobility	Transaction ID: SB21B.4347 Date of Disbursement
	Mailing Address PO Box 6463	<input type="text" value="04"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone Service	<input type="text" value="253.51"/>
	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)	<input type="text" value="651.12"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4452 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 199.68 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.37714 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 200.27 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) ccAdvertising Mailing Address 5900 Fort Drive Suite 302 City Centerville State VA Zip Code 20121 Purpose of Disbursement Fundraising Survey Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4370 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	899.95
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) ccAdvertising	Transaction ID: SB21B.4453 Date of Disbursement 05 / 23 / 2011
	Mailing Address 5900 Fort Drive Suite 302	Amount of Each Disbursement this Period 10000.00
	City Centerville State VA Zip Code 20121	
	Purpose of Disbursement Fundraising Survey 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) Clockwork Systems	Transaction ID: SB21B.4354 Date of Disbursement 03 / 03 / 2011
	Mailing Address 6001 Gloster Road	Amount of Each Disbursement this Period 1149.39
	City Bethesda State MD Zip Code 20816-1147	
	Purpose of Disbursement Direct Mail - PAC Fundraising 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) Judith A. Crouch	Transaction ID: SB21B.40503 Date of Disbursement 01 / 14 / 2011
	Mailing Address 59 Belmont Drive	Amount of Each Disbursement this Period 1299.36
	City Little Rock State AR Zip Code 72204	
	Purpose of Disbursement Payroll 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)	▶	12448.75
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Dresner, Wickers & Associates Mailing Address 655 Third Street City San Francisco State CA Zip Code 94107-1901 Purpose of Disbursement Direct Mail - PAC Fundraising 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:	Transaction ID: SB21B.4352 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 1 Amount of Each Disbursement this Period 16520.00
B.	Full Name (Last, First, Middle Initial) J. Hogan Gidley Mailing Address 2507 Rigby Drive City Columbia State SC Zip Code 29204 Purpose of Disbursement Reimbursement - Insurance & Telephone 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:	Transaction ID: SB21B.4120 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 1 1 Amount of Each Disbursement this Period 243.36
C.	Full Name (Last, First, Middle Initial) J. Hogan Gidley Mailing Address 2507 Rigby Drive City Columbia State SC Zip Code 29204 Purpose of Disbursement Payroll 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:	Transaction ID: SB21B.4151 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 1 1 Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

21763.36

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley <hr/> Mailing Address 2507 Rigby Drive <hr/> City Columbia State SC Zip Code 29204 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4188 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) J. Hogan Gidley <hr/> Mailing Address 2507 Rigby Drive <hr/> City Columbia State SC Zip Code 29204 <hr/> Purpose of Disbursement Reimbursement - Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4210 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 400.31
C.	Full Name (Last, First, Middle Initial) J. Hogan Gidley <hr/> Mailing Address 2507 Rigby Drive <hr/> City Columbia State SC Zip Code 29204 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4218 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

10400.31

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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.4227 Date of Disbursement 02 / 18 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 243.36
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Reimbursement - Insurance & Telephone	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) J. Hogan Gidley	Transaction ID: SB21B.4240 Date of Disbursement 02 / 28 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 5000.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll	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) J. Hogan Gidley	Transaction ID: SB21B.4274 Date of Disbursement 03 / 15 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1250.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll	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)	6493.36
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.4303 Date of Disbursement 03 / 28 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 141.54
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Reimbursement - Travel 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) J. Hogan Gidley	Transaction ID: SB21B.4308 Date of Disbursement 04 / 01 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1250.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll 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) J. Hogan Gidley	Transaction ID: SB21B.4340 Date of Disbursement 04 / 15 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1250.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll 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)	2641.54
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.37718 Date of Disbursement 06 / 01 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1250.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll 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) J. Hogan Gidley	Transaction ID: SB21B.37683 Date of Disbursement 06 / 02 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 176.73
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Reimbursement - Postage 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) J. Hogan Gidley	Transaction ID: SB21B.37723 Date of Disbursement 06 / 15 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1250.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll 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)	▶	2676.73
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) J. Hogan Gidley	Transaction ID: SB21B.37715 Date of Disbursement 06 / 27 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1259.68
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Reimbursement - Travel & Meals	
	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) J. Hogan Gidley	Transaction ID: SB21B.37831 Date of Disbursement 06 / 30 / 2011
	Mailing Address 2507 Rigby Drive	Amount of Each Disbursement this Period 1250.00
	City Columbia State SC Zip Code 29204	
	Purpose of Disbursement Payroll	
	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) GSL Solutions, Inc.	Transaction ID: SB21B.4172 Date of Disbursement 01 / 20 / 2011
	Mailing Address 1411 N. Westchore Boulevard Suite 204	Amount of Each Disbursement this Period 4721.46
	City Tampa State FL Zip Code 33607	
	Purpose of Disbursement Web Development/Hosting	
	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)	7231.14
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westchore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</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: SB21B.4209</p> <p>Date of Disbursement 02 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 2363.31</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westchore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</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: SB21B.4433</p> <p>Date of Disbursement 05 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 5484.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westchore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</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: SB21B.4448</p> <p>Date of Disbursement 05 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 3526.58</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11373.89

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) GSL Solutions, Inc.</p> <p>Mailing Address 1411 N. Westchore Boulevard Suite 204</p> <p>City Tampa State FL Zip Code 33607</p> <p>Purpose of Disbursement Web Development/Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.37708</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 1563.44</p>
<p>B. Full Name (Last, First, Middle Initial) Harland Clarke</p> <p>Mailing Address 10931 Laureate Drive</p> <p>City San Antonio State TX Zip Code 78249</p> <p>Purpose of Disbursement Office Expense - Check Order</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4420</p> <p>Date of Disbursement 05 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 112.97</p>
<p>C. Full Name (Last, First, Middle Initial) Katherine E. Harris</p> <p>Mailing Address 3226 Stonepine</p> <p>City Bryant State AR Zip Code 72022</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4152</p> <p>Date of Disbursement 01 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3176.41

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris Mailing Address 3226 Stonepine City State Zip Code Bryant AR 72022 Purpose of Disbursement Reimbursement - Mileage 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) ▼	Transaction ID: SB21B.4171 Date of Disbursement 01 / 20 / 2011 Amount of Each Disbursement this Period 64.12
B.	Full Name (Last, First, Middle Initial) Katherine E. Harris Mailing Address 3226 Stonepine City State Zip Code Bryant AR 72022 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB21B.4189 Date of Disbursement 01 / 31 / 2011 Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) Katherine E. Harris Mailing Address 3226 Stonepine City State Zip Code Bryant AR 72022 Purpose of Disbursement Reimbursement - Insurance & Mileage 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) ▼	Transaction ID: SB21B.4200 Date of Disbursement 02 / 04 / 2011 Amount of Each Disbursement this Period 210.09

SUBTOTAL of Disbursements This Page (optional) ▶	1774.21
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.4219 Date of Disbursement
	Mailing Address 3226 Stonepine	<input type="text" value="02"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1500.00"/>
	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) Katherine E. Harris	Transaction ID: SB21B.4241 Date of Disbursement
	Mailing Address 3226 Stonepine	<input type="text" value="02"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1500.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.4249 Date of Disbursement
	Mailing Address 3226 Stonepine	<input type="text" value="03"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement - Insurance, Mileage & Postage	<input type="text" value="213.80"/>
	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="3213.80"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.4275 Date of Disbursement 03 / 15 / 2011
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 1650.00
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	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) Katherine E. Harris	Transaction ID: SB21B.4285 Date of Disbursement 03 / 18 / 2011
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 143.70
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Reimbursement - Mileage	Category/Type
	Candidate Name	
	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) Katherine E. Harris	Transaction ID: SB21B.4309 Date of Disbursement 04 / 01 / 2011
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 1650.00
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	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)	▶	3443.70
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.4326 Date of Disbursement 04 / 08 / 2011
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 130.75
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Reimbursement - Insurance	Category/ Type
	Candidate Name	
	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) Katherine E. Harris	Transaction ID: SB21B.4341 Date of Disbursement 04 / 15 / 2011
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 1650.00
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	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) Katherine E. Harris	Transaction ID: SB21B.4456 Date of Disbursement 04 / 28 / 2011
	Mailing Address 3226 Stonepine	Amount of Each Disbursement this Period 1650.00
	City Bryant State AR Zip Code 72022	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	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)	▶	3430.75
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

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris	Transaction ID: SB21B.4431
	Mailing Address 3226 Stonepine	Date of Disbursement 05 / 09 / 2011
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period 249.76
	Purpose of Disbursement Reimbursement - Insurance & Mileage	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) Katherine E. Harris	Transaction ID: SB21B.4460
	Mailing Address 3226 Stonepine	Date of Disbursement 05 / 13 / 2011
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period 1650.00
	Purpose of Disbursement Payroll	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) Katherine E. Harris	Transaction ID: SB21B.37719
	Mailing Address 3226 Stonepine	Date of Disbursement 06 / 01 / 2011
	City Bryant State AR Zip Code 72022	Amount of Each Disbursement this Period 1650.00
	Purpose of Disbursement Payroll	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)	3549.76
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Katherine E. Harris Mailing Address 3226 Stonepine City State Zip Code Bryant AR 72022 Purpose of Disbursement Reimbursement - Insurance & Mileage 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) ▼	Transaction ID: SB21B.37692 Date of Disbursement 06 / 06 / 2011 Amount of Each Disbursement this Period 237.94 Category/ Type
B.	Full Name (Last, First, Middle Initial) Katherine E. Harris Mailing Address 3226 Stonepine City State Zip Code Bryant AR 72022 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB21B.37724 Date of Disbursement 06 / 15 / 2011 Amount of Each Disbursement this Period 1650.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Katherine E. Harris Mailing Address 3226 Stonepine City State Zip Code Bryant AR 72022 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB21B.37832 Date of Disbursement 06 / 30 / 2011 Amount of Each Disbursement this Period 1650.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3537.94

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Heritage Communications, Inc. Mailing Address 2402 Wildwood Ave. City Sherwood State AR Zip Code 72120 Purpose of Disbursement Telephone Equipment Lease 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) ▼	Transaction ID: SB21B.4159 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 1 1	Amount of Each Disbursement this Period 199.31
B.	Full Name (Last, First, Middle Initial) Heritage Communications, Inc. Mailing Address 2402 Wildwood Ave. City Sherwood State AR Zip Code 72120 Purpose of Disbursement Telephone Equipment Lease 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) ▼	Transaction ID: SB21B.4207 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 1	Amount of Each Disbursement this Period 199.31
C.	Full Name (Last, First, Middle Initial) Heritage Communications, Inc. Mailing Address 2402 Wildwood Ave. City Sherwood State AR Zip Code 72120 Purpose of Disbursement Telephone Equipment Lease 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) ▼	Transaction ID: SB21B.4258 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 1 1	Amount of Each Disbursement this Period 199.31

SUBTOTAL of Disbursements This Page (optional) ▶

597.93

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Heritage Communications, Inc.	Transaction ID: SB21B.4332
	Mailing Address 2402 Wildwood Ave.	Date of Disbursement MM / DD / YYYY 04 / 08 / 2011
	City Sherwood State AR Zip Code 72120	Amount of Each Disbursement this Period 199.31
	Purpose of Disbursement Telephone Equipment Lease 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) Heritage Communications, Inc.	Transaction ID: SB21B.4446
	Mailing Address 2402 Wildwood Ave.	Date of Disbursement MM / DD / YYYY 05 / 16 / 2011
	City Sherwood State AR Zip Code 72120	Amount of Each Disbursement this Period 199.31
	Purpose of Disbursement Telephone Equipment Lease 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) Heritage Communications, Inc.	Transaction ID: SB21B.37709
	Mailing Address 2402 Wildwood Ave.	Date of Disbursement MM / DD / YYYY 06 / 20 / 2011
	City Sherwood State AR Zip Code 72120	Amount of Each Disbursement this Period 199.31
	Purpose of Disbursement Telephone Equipment Lease 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)	597.93
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC Mailing Address 45 North Hill Drive Suite 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Consulting - Legal 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) ▼	Transaction ID: SB21B.40678 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 1 1 Amount of Each Disbursement this Period 885.00
B.	Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC Mailing Address 45 North Hill Drive Suite 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Consulting - Legal 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) ▼	Transaction ID: SB21B.40679 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 2543.75
C.	Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC Mailing Address 45 North Hill Drive Suite 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Consulting - Legal 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) ▼	Transaction ID: SB21B.40680 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 1 1 Amount of Each Disbursement this Period 1387.50

SUBTOTAL of Disbursements This Page (optional) ▶

4816.25

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.4123 Date of Disbursement 01 / 06 / 2011
	Mailing Address 500 Parliament Street	Amount of Each Disbursement this Period 575.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Reimbursement - Insurance, Telephone Service & Professional License	
	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) Lauren Huckabee	Transaction ID: SB21B.4153 Date of Disbursement 01 / 14 / 2011
	Mailing Address 500 Parliament Street	Amount of Each Disbursement this Period 1500.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll	
	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) Lauren Huckabee	Transaction ID: SB21B.4180 Date of Disbursement 01 / 26 / 2011
	Mailing Address 500 Parliament Street	Amount of Each Disbursement this Period 375.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Reimbursement - Insurance & Telephone	
	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)	▶	2450.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.4190 Date of Disbursement 01 / 31 / 2011
	Mailing Address 500 Parliament Street	Amount of Each Disbursement this Period 1500.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll 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) Lauren Huckabee	Transaction ID: SB21B.4220 Date of Disbursement 02 / 15 / 2011
	Mailing Address 500 Parliament Street	Amount of Each Disbursement this Period 1500.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll 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) Lauren Huckabee	Transaction ID: SB21B.4242 Date of Disbursement 02 / 28 / 2011
	Mailing Address 500 Parliament Street	Amount of Each Disbursement this Period 2500.00
	City Little Rock State AR Zip Code 72211	
	Purpose of Disbursement Payroll 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)	5500.00
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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Lauren Huckabee</p> <p>Mailing Address 500 Parliament Street</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Reimbursement - Insurance & Telephone</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: SB21B.4244</p> <p>Date of Disbursement 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 375.00</p>
<p>B. Full Name (Last, First, Middle Initial) Lauren Huckabee</p> <p>Mailing Address 500 Parliament Street</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Payroll</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: SB21B.4276</p> <p>Date of Disbursement 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 1937.50</p>
<p>C. Full Name (Last, First, Middle Initial) Lauren Huckabee</p> <p>Mailing Address 500 Parliament Street</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Reimbursement - Telephone</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: SB21B.4299</p> <p>Date of Disbursement 03 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 427.84</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2740.34

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.4310 Date of Disbursement																			
	Mailing Address 500 Parliament Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>1937.50</td></tr></table>	1937.50																		
1937.50																					
	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) Lauren Huckabee	Transaction ID: SB21B.4328 Date of Disbursement																			
	Mailing Address 500 Parliament Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reimbursement - Insurance, Telephone & Travel	<table border="1"><tr><td>874.05</td></tr></table>	874.05																		
874.05																					
	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) Lauren Huckabee	Transaction ID: SB21B.4342 Date of Disbursement																			
	Mailing Address 500 Parliament Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>1937.50</td></tr></table>	1937.50																		
1937.50																					
	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)	<table border="1"><tr><td>4749.05</td></tr></table>	4749.05
4749.05		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.4457 Date of Disbursement
	Mailing Address 500 Parliament Street	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="6197.50"/>
	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) Lauren Huckabee	Transaction ID: SB21B.4434 Date of Disbursement
	Mailing Address 500 Parliament Street	<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement - Insurance & Telephone	<input type="text" value="625.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Lauren Huckabee	Transaction ID: SB21B.4461 Date of Disbursement
	Mailing Address 500 Parliament Street	<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72211	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1937.50"/>
	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="8760.00"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lauren Huckabee</p> <p>Mailing Address 500 Parliament Street</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Payroll</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: SB21B.37720</p> <p>Date of Disbursement 06 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 3662.50</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lauren Huckabee</p> <p>Mailing Address 500 Parliament Street</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Reimbursement - Insurance & Telephone</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: SB21B.37686</p> <p>Date of Disbursement 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 375.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Lauren Huckabee</p> <p>Mailing Address 500 Parliament Street</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Payroll</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: SB21B.37725</p> <p>Date of Disbursement 06 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 1937.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5975.00

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Lauren Huckabee <hr/> Mailing Address 500 Parliament Street <hr/> City Little Rock State AR Zip Code 72211 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.37833 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 1	Amount of Each Disbursement this Period 1937.50
B.	Full Name (Last, First, Middle Initial) David M. John <hr/> Mailing Address 15 Thankful Bradley Road <hr/> City West Redding State CT Zip Code 06896 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4154 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 1 1	Amount of Each Disbursement this Period 1751.00
C.	Full Name (Last, First, Middle Initial) David M. John <hr/> Mailing Address 15 Thankful Bradley Road <hr/> City West Redding State CT Zip Code 06896 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4191 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 1	Amount of Each Disbursement this Period 1751.00

SUBTOTAL of Disbursements This Page (optional)	5439.50
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.4221 Date of Disbursement 02 / 15 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll	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) David M. John	Transaction ID: SB21B.4243 Date of Disbursement 02 / 28 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1751.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll	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) David M. John	Transaction ID: SB21B.4257 Date of Disbursement 03 / 07 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 140.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Reimbursement - Telephone	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) ▶

3642.00

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 15 Thankful Bradley Road</p> <p>City West Redding State CT Zip Code 06896</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4277</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1937.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 15 Thankful Bradley Road</p> <p>City West Redding State CT Zip Code 06896</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4311</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1937.50"/></p>
<p>C. Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 15 Thankful Bradley Road</p> <p>City West Redding State CT Zip Code 06896</p> <p>Purpose of Disbursement Reimbursement - Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4327</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="182.00"/></p>

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 15 Thankful Bradley Road</p> <p>City West Redding State CT Zip Code 06896</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4343</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1937.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 15 Thankful Bradley Road</p> <p>City West Redding State CT Zip Code 06896</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4458</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1937.50"/></p>
<p>C. Full Name (Last, First, Middle Initial) David M. John</p> <p>Mailing Address 15 Thankful Bradley Road</p> <p>City West Redding State CT Zip Code 06896</p> <p>Purpose of Disbursement Reimbursement - Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4432</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="70.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3945.00"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.4462 Date of Disbursement 05 / 13 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1937.50
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll 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) David M. John	Transaction ID: SB21B.37721 Date of Disbursement 06 / 01 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1937.50
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll 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) David M. John	Transaction ID: SB21B.37691 Date of Disbursement 06 / 06 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 70.00
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Reimbursement - Telephone 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)	3945.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) David M. John	Transaction ID: SB21B.37726 Date of Disbursement 06 / 15 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1937.50
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll 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) David M. John	Transaction ID: SB21B.37834 Date of Disbursement 06 / 30 / 2011
	Mailing Address 15 Thankful Bradley Road	Amount of Each Disbursement this Period 1937.50
	City West Redding State CT Zip Code 06896	
	Purpose of Disbursement Payroll 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) JPMS Cox, PLLC	Transaction ID: SB21B.4129 Date of Disbursement 01 / 06 / 2011
	Mailing Address 11300 Cantrell Road Suite 301	Amount of Each Disbursement this Period 6000.00
	City Little Rock State AR Zip Code 72212	
	Purpose of Disbursement Accounting & Compliance Fees 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)	9875.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) JPMS Cox, PLLC <hr/> Mailing Address 11300 Cantrell Road Suite 301 <hr/> City Little Rock State AR Zip Code 72212 <hr/> Purpose of Disbursement Accounting & Compliance Fees Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4206 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 1	Amount of Each Disbursement this Period 6000.00
B.	Full Name (Last, First, Middle Initial) JPMS Cox, PLLC <hr/> Mailing Address 11300 Cantrell Road Suite 301 <hr/> City Little Rock State AR Zip Code 72212 <hr/> Purpose of Disbursement Accounting & Compliance Fees Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1	Amount of Each Disbursement this Period 6000.00
C.	Full Name (Last, First, Middle Initial) JPMS Cox, PLLC <hr/> Mailing Address 11300 Cantrell Road Suite 301 <hr/> City Little Rock State AR Zip Code 72212 <hr/> Purpose of Disbursement Accounting & Compliance Fees Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4325 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1	Amount of Each Disbursement this Period 6000.00

SUBTOTAL of Disbursements This Page (optional) ▶	18000.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) JPMS Cox, PLLC	Transaction ID: SB21B.4451 Date of Disbursement 05 / 16 / 2011
	Mailing Address 11300 Cantrell Road Suite 301	Amount of Each Disbursement this Period 6000.00
	City Little Rock State AR Zip Code 72212	
	Purpose of Disbursement Accounting & Compliance Fees	
	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) LCM Strategies	Transaction ID: SB21B.4156 Date of Disbursement 01 / 14 / 2011
	Mailing Address 3409 Hopkins Street	Amount of Each Disbursement this Period 4500.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Direct Mail - PAC Fundraising	
	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) LCM Strategies	Transaction ID: SB21B.4208 Date of Disbursement 02 / 08 / 2011
	Mailing Address 3409 Hopkins Street	Amount of Each Disbursement this Period 4500.00
	City Nashville State TN Zip Code 37215	
	Purpose of Disbursement Direct Mail - PAC Fundraising	
	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)	15000.00
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

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) LCM Strategies</p> <p>Mailing Address 3409 Hopkins Street</p> <p>City Nashville State TN Zip Code 37215</p> <p>Purpose of Disbursement Direct Mail - PAC Fundraising</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: SB21B.4256</p> <p>Date of Disbursement 03 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 4500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) LCM Strategies</p> <p>Mailing Address 3409 Hopkins Street</p> <p>City Nashville State TN Zip Code 37215</p> <p>Purpose of Disbursement Direct Mail - PAC Fundraising</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: SB21B.4329</p> <p>Date of Disbursement 04 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 4500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) LCM Strategies</p> <p>Mailing Address 3409 Hopkins Street</p> <p>City Nashville State TN Zip Code 37215</p> <p>Purpose of Disbursement Direct Mail - PAC Fundraising</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: SB21B.4450</p> <p>Date of Disbursement 05 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 4500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13500.00

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Chris Maiorana</p> <p>Mailing Address 9910 Longhorn Skyway</p> <p>City Dripping Springs State TX Zip Code 78620</p> <p>Purpose of Disbursement Reimbursement - Domain Renewal</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: SB21B.4365</p> <p>Date of Disbursement 03 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 34.99</p>
<p>B. Full Name (Last, First, Middle Initial) Chris Maiorana</p> <p>Mailing Address 9910 Longhorn Skyway</p> <p>City Dripping Springs State TX Zip Code 78620</p> <p>Purpose of Disbursement Reimbursement - Website Expense</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: SB21B.4366</p> <p>Date of Disbursement 04 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 19.95</p>
<p>C. Full Name (Last, First, Middle Initial) Chris Maiorana</p> <p>Mailing Address 9910 Longhorn Skyway</p> <p>City Dripping Springs State TX Zip Code 78620</p> <p>Purpose of Disbursement Reimbursement - Renewal of Web Address</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: SB21B.4367</p> <p>Date of Disbursement 04 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 34.99</p>

SUBTOTAL of Disbursements This Page (optional) ▶

89.93

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) MDS Communications Corp. Mailing Address 545 W. Juanita Ave City Mesa State AZ Zip Code 85210 Purpose of Disbursement Fundraising Expense - Telephone Calls 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) ▼	Transaction ID: SB21B.37684 Date of Disbursement 06 / 02 / 2011 Amount of Each Disbursement this Period 3556.80 Category/Type
B.	Full Name (Last, First, Middle Initial) MDS Communications Corp. Mailing Address 545 W. Juanita Ave City Mesa State AZ Zip Code 85210 Purpose of Disbursement Fundraising Expense - Telephone Calls 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) ▼	Transaction ID: SB21B.37711 Date of Disbursement 06 / 20 / 2011 Amount of Each Disbursement this Period 1045.53 Category/Type
C.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Transaction ID: SB21B.4356 Date of Disbursement 01 / 14 / 2011 Amount of Each Disbursement this Period 1334.80 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

5937.13

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4166 Date of Disbursement 01 / 18 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Amount of Each Disbursement this Period 105.63 Category/Type

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4169 Date of Disbursement 01 / 20 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Amount of Each Disbursement this Period 190.51 Category/Type

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4170 Date of Disbursement 01 / 20 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Amount of Each Disbursement this Period 21.01 Category/Type

SUBTOTAL of Disbursements This Page (optional)	317.15
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)

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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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4192 Date of Disbursement 01 / 31 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Amount of Each Disbursement this Period 85.51 Category/Type

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4193 Date of Disbursement 01 / 31 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Amount of Each Disbursement this Period 105.63 Category/Type

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4357 Date of Disbursement 01 / 31 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Amount of Each Disbursement this Period 1150.50 Category/Type

SUBTOTAL of Disbursements This Page (optional)	1341.64
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Transaction ID: SB21B.4358 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 1	Amount of Each Disbursement this Period 964.50
B.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Transaction ID: SB21B.4223 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 1	Amount of Each Disbursement this Period 120.51
C.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Transaction ID: SB21B.4224 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 1	Amount of Each Disbursement this Period 65.50

SUBTOTAL of Disbursements This Page (optional)	1150.51
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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</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: SB21B.4359</p> <p>Date of Disbursement 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1086.97</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing 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: SB21B.4246</p> <p>Date of Disbursement 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 81.79</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing 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: SB21B.4278</p> <p>Date of Disbursement 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 81.49</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1250.25

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</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: SB21B.4360 Date of Disbursement 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 736.26</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</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: SB21B.4361 Date of Disbursement 04 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 728.26</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing 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: SB21B.4315 Date of Disbursement 04 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 81.49</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1546.01

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Transaction ID: SB21B.4344 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 1 Amount of Each Disbursement this Period 91.99
B.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Transaction ID: SB21B.4362 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 1 Amount of Each Disbursement this Period 666.35
C.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Transaction ID: SB21B.4396 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 1 Amount of Each Disbursement this Period 76.50

SUBTOTAL of Disbursements This Page (optional) ▶

834.84

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)
HUCK PAC

<p>A. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</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: SB21B.4397</p> <p>Date of Disbursement 04 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 740.59</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing 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: SB21B.4412</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 81.49</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Processing 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: SB21B.4417</p> <p>Date of Disbursement 05 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 70.33</p>

SUBTOTAL of Disbursements This Page (optional) ▶

892.41

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4442 Date of Disbursement 05 / 13 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Amount of Each Disbursement this Period 518.30 Category/Type

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.4443 Date of Disbursement 05 / 13 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Amount of Each Disbursement this Period 83.92 Category/Type

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.37677 Date of Disbursement 06 / 01 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Processing Fee 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) ▼	Amount of Each Disbursement this Period 83.92 Category/Type

SUBTOTAL of Disbursements This Page (optional)	686.14
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.37722 Date of Disbursement
	Mailing Address 12921 Cantrell Road Suite 100	<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72223	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="650.27"/>
	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) Paychex, Inc.	Transaction ID: SB21B.37702 Date of Disbursement
	Mailing Address 12921 Cantrell Road Suite 100	<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72223	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Processing Fee	<input type="text" value="83.92"/>
	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) Paychex, Inc.	Transaction ID: SB21B.37727 Date of Disbursement
	Mailing Address 12921 Cantrell Road Suite 100	<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72223	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="518.30"/>
	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="1252.49"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.37878 Date of Disbursement 06 / 23 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Service Fee 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) ▼	Amount of Each Disbursement this Period 83.92 Category/Type

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: SB21B.37835 Date of Disbursement 06 / 30 / 2011
	Mailing Address 12921 Cantrell Road Suite 100 City Little Rock State AR Zip Code 72223 Purpose of Disbursement Payroll Taxes 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) ▼	Amount of Each Disbursement this Period 518.30 Category/Type

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4165 Date of Disbursement 01 / 18 / 2011
	Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Amount of Each Disbursement this Period 353.04 Category/Type

SUBTOTAL of Disbursements This Page (optional)	955.26
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4167 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="0.35"/>
	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) Paypal	Transaction ID: SB21B.4168 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="-0.01"/>
	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) Paypal	Transaction ID: SB21B.4174 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="9.40"/>
	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="9.74"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4175</p> <p>Date of Disbursement 01 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 17.20</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4176</p> <p>Date of Disbursement 01 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 9.94</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4177</p> <p>Date of Disbursement 01 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 9.01</p>

SUBTOTAL of Disbursements This Page (optional) ▶

36.15

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)

<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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4178 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="13.57"/>
	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) Paypal	Transaction ID: SB21B.4179 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="3.65"/>
	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) Paypal	Transaction ID: SB21B.4181 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="6.32"/>
	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="23.54"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4182 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="25.15"/>
	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) Paypal	Transaction ID: SB21B.4185 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="47.58"/>
	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) Paypal	Transaction ID: SB21B.4186 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="23.75"/>
	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="96.48"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4187 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="3.45"/>
	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) Paypal	Transaction ID: SB21B.4194 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="7.89"/>
	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) Paypal	Transaction ID: SB21B.4195 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="4.63"/>
	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="15.97"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4196 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="1.42"/>
	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) Paypal	Transaction ID: SB21B.4197 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="8.80"/>
	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) Paypal	Transaction ID: SB21B.4202 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="9.49"/>
	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="19.71"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4203</p> <p>Date of Disbursement 02 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 110.82</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4204</p> <p>Date of Disbursement 02 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 20.58</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4205</p> <p>Date of Disbursement 02 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 40.53</p>

SUBTOTAL of Disbursements This Page (optional)	171.93
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4211 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="32.72"/>
	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) Paypal	Transaction ID: SB21B.4212 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="129.60"/>
	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) Paypal	Transaction ID: SB21B.4213 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="102.95"/>
	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="265.27"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4214 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 31.15 Category/Type

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4215 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 1 1
	Amount of Each Disbursement this Period 12.44 Category/Type

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4216 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 1 1
	Amount of Each Disbursement this Period 15.51 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	59.10
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4217</p> <p>Date of Disbursement 02 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 77.91</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4222</p> <p>Date of Disbursement 02 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 60.17</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4225</p> <p>Date of Disbursement 02 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 20.54</p>

SUBTOTAL of Disbursements This Page (optional) ▶

158.62

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4226</p> <p>Date of Disbursement 02 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 11.97</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4229</p> <p>Date of Disbursement 02 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 8.89</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4230</p> <p>Date of Disbursement 02 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 5.34</p>

SUBTOTAL of Disbursements This Page (optional) ▶

26.20

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)

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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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4231 Date of Disbursement 02 / 21 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 37.90
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Paypal	Transaction ID: SB21B.4232 Date of Disbursement 02 / 22 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 51.48
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Paypal	Transaction ID: SB21B.4233 Date of Disbursement 02 / 23 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 56.84
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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)	▶	146.22
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4234 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="98.20"/>
	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) Paypal	Transaction ID: SB21B.4235 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="75.80"/>
	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) Paypal	Transaction ID: SB21B.4237 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="28.93"/>
	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="202.93"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4238 Date of Disbursement 02 / 27 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 9.68
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Paypal	Transaction ID: SB21B.4239 Date of Disbursement 02 / 28 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 51.40
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Paypal	Transaction ID: SB21B.4245 Date of Disbursement 03 / 01 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 60.38
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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)	▶	121.46
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4247 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="19.33"/>
	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) Paypal	Transaction ID: SB21B.4248 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="134.02"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4252 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="397.03"/>
	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="550.38"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4253</p> <p>Date of Disbursement 03 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 33.80</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4254</p> <p>Date of Disbursement 03 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 19.78</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4255</p> <p>Date of Disbursement 03 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 34.32</p>

SUBTOTAL of Disbursements This Page (optional) ▶

87.90

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4260</p> <p>Date of Disbursement 03 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 36.66</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4263</p> <p>Date of Disbursement 03 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 34.77</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4264</p> <p>Date of Disbursement 03 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 20.60</p>

SUBTOTAL of Disbursements This Page (optional) ▶

92.03

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4265 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="15.48"/>
	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) Paypal	Transaction ID: SB21B.4270 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="14.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4271 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="7.04"/>
	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="36.52"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4272 Date of Disbursement 03 / 14 / 2011
	Amount of Each Disbursement this Period 42.17

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4273 Date of Disbursement 03 / 15 / 2011
	Amount of Each Disbursement this Period 16.70

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4279 Date of Disbursement 03 / 16 / 2011
	Amount of Each Disbursement this Period 56.90

SUBTOTAL of Disbursements This Page (optional) ▶	115.77
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4280</p> <p>Date of Disbursement 03 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 28.35</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4281</p> <p>Date of Disbursement 03 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 34.49</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37869</p> <p>Date of Disbursement 03 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 60.00</p>

SUBTOTAL of Disbursements This Page (optional)	122.84
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4289 Date of Disbursement 03 / 19 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 12.75
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Paypal	Transaction ID: SB21B.4290 Date of Disbursement 03 / 20 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 7.42
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Paypal	Transaction ID: SB21B.4291 Date of Disbursement 03 / 21 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 15.00
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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)	▶	35.17
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4292 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="29.41"/>
	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) Paypal	Transaction ID: SB21B.4293 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="35.19"/>
	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) Paypal	Transaction ID: SB21B.4294 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="260.74"/>
	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="325.34"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4295</p> <p>Date of Disbursement 03 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 74.35</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37870</p> <p>Date of Disbursement 03 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 41.70</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4300</p> <p>Date of Disbursement 03 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 19.34</p>

SUBTOTAL of Disbursements This Page (optional) ▶

135.39

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4301</p> <p>Date of Disbursement 03 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 8.42</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4302</p> <p>Date of Disbursement 03 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 18.42</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4304</p> <p>Date of Disbursement 03 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 39.55</p>

SUBTOTAL of Disbursements This Page (optional) ▶

66.39

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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4305 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 149.65 Category/Type

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4306 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 349.64 Category/Type

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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) ▼	Transaction ID: SB21B.4307 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period 77.20 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	576.49
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4312 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="11.81"/>
	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) Paypal	Transaction ID: SB21B.4313 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="12.12"/>
	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) Paypal	Transaction ID: SB21B.4314 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="81.22"/>
	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="105.15"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4316</p> <p>Date of Disbursement 04 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 203.65</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4317</p> <p>Date of Disbursement 04 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 165.90</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4318</p> <p>Date of Disbursement 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 91.22</p>

SUBTOTAL of Disbursements This Page (optional) ▶

460.77

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4324</p> <p>Date of Disbursement 04 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 194.50</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4333</p> <p>Date of Disbursement 04 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 38.41</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4334</p> <p>Date of Disbursement 04 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 55.68</p>

SUBTOTAL of Disbursements This Page (optional) ▶

288.59

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4335 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="66.12"/>
	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) Paypal	Transaction ID: SB21B.4336 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="28.19"/>
	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) Paypal	Transaction ID: SB21B.4337 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="11.45"/>
	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="105.76"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4338 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="7.37"/>
	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) Paypal	Transaction ID: SB21B.4339 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="14.15"/>
	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) Paypal	Transaction ID: SB21B.4350 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="7.67"/>
	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)

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4351 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="2.96"/>
	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) Paypal	Transaction ID: SB21B.4381 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="68.22"/>
	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) Paypal	Transaction ID: SB21B.4382 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="45.82"/>
	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="117.00"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4383 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="14.32"/>
	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) Paypal	Transaction ID: SB21B.4384 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="18.39"/>
	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) Paypal	Transaction ID: SB21B.4385 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="20.77"/>
	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="53.48"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4386</p> <p>Date of Disbursement 04 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 12.30</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4387</p> <p>Date of Disbursement 04 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 15.22</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4388</p> <p>Date of Disbursement 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 9.39</p>

SUBTOTAL of Disbursements This Page (optional) ▶

36.91

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37871</p> <p>Date of Disbursement 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 20.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4390</p> <p>Date of Disbursement 04 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 5.46</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4391</p> <p>Date of Disbursement 04 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 247.44</p>

SUBTOTAL of Disbursements This Page (optional) ▶

272.90

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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.4393 Date of Disbursement 04 / 28 / 2011
	Amount of Each Disbursement this Period 32.84
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) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.4411 Date of Disbursement 04 / 29 / 2011
	Amount of Each Disbursement this Period 9.40
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) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.4414 Date of Disbursement 04 / 30 / 2011
	Amount of Each Disbursement this Period 222.58
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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	264.82
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4415</p> <p>Date of Disbursement 05 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 61.60</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4416</p> <p>Date of Disbursement 05 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 52.34</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4418</p> <p>Date of Disbursement 05 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 89.11</p>

SUBTOTAL of Disbursements This Page (optional) ▶

203.05

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4419</p> <p>Date of Disbursement 05 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 9.74</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4421</p> <p>Date of Disbursement 05 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 26.09</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4422</p> <p>Date of Disbursement 05 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 5.40</p>

SUBTOTAL of Disbursements This Page (optional) ▶

41.23

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.4424 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="05"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="2.85"/>
	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) Paypal	Transaction ID: SB21B.4425 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="8.54"/>
	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) Paypal	Transaction ID: SB21B.4426 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="05"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="4.41"/>
	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="15.80"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4437</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 7.48</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4438</p> <p>Date of Disbursement 05 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 15.48</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4440</p> <p>Date of Disbursement 05 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 8.36</p>

SUBTOTAL of Disbursements This Page (optional) ▶

31.32

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4441</p> <p>Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 38.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4444</p> <p>Date of Disbursement 05 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 17.73</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.4445</p> <p>Date of Disbursement 05 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 10.70</p>

SUBTOTAL of Disbursements This Page (optional) ▶

66.96

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:
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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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37807</p> <p>Date of Disbursement 05 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 3.24</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37808</p> <p>Date of Disbursement 05 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 2.22</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37809</p> <p>Date of Disbursement 05 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 4.68</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10.14

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:
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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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37810 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="05"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="23.57"/>
	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) Paypal	Transaction ID: SB21B.37811 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="05"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="33.97"/>
	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) Paypal	Transaction ID: SB21B.37812 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="05"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="20.03"/>
	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)

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37813 Date of Disbursement																			
	Mailing Address 4100 Solutions Center 774100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	2		2	0	1	1												
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Processing Fees	<table border="1"><tr><td>14.70</td></tr></table>	14.70																		
14.70																					
	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) Paypal	Transaction ID: SB21B.37814 Date of Disbursement																			
	Mailing Address 4100 Solutions Center 774100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	3		2	0	1	1												
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Processing Fees	<table border="1"><tr><td>8.35</td></tr></table>	8.35																		
8.35																					
	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) Paypal	Transaction ID: SB21B.37815 Date of Disbursement																			
	Mailing Address 4100 Solutions Center 774100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	4		2	0	1	1												
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Processing Fees	<table border="1"><tr><td>15.42</td></tr></table>	15.42																		
15.42																					
	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)	<table border="1"><tr><td>38.47</td></tr></table>	38.47
38.47		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37816</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 26.14</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37817</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 16.35</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37670</p> <p>Date of Disbursement 05 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 5.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

47.99

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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37671 Date of Disbursement 05 / 28 / 2011
	Amount of Each Disbursement this Period 9.96
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) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37672 Date of Disbursement 05 / 29 / 2011
	Amount of Each Disbursement this Period 7.32
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) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37673 Date of Disbursement 05 / 30 / 2011
	Amount of Each Disbursement this Period 17.39
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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	34.67
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 205 / 236

<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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37674 Date of Disbursement 05 / 31 / 2011
	Amount of Each Disbursement this Period 95.78
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) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37675 Date of Disbursement 06 / 01 / 2011
	Amount of Each Disbursement this Period 26.65
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) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37680 Date of Disbursement 06 / 02 / 2011
	Amount of Each Disbursement this Period 14.76
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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	137.19
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37687 Date of Disbursement 06 / 03 / 2011
	Amount of Each Disbursement this Period 8.00
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) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37688 Date of Disbursement 06 / 04 / 2011
	Amount of Each Disbursement this Period 8.98
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) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: SB21B.37689 Date of Disbursement 06 / 05 / 2011
	Amount of Each Disbursement this Period 14.20
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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	31.18
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37690 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="4.00"/>
	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) Paypal	Transaction ID: SB21B.37693 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="1.55"/>
	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) Paypal	Transaction ID: SB21B.37694 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="29.31"/>
	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="34.86"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37695 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="15.65"/>
	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) Paypal	Transaction ID: SB21B.37696 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="16.49"/>
	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) Paypal	Transaction ID: SB21B.37697 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="8.68"/>
	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="40.82"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37698 Date of Disbursement MM / DD / YYYY 06 / 12 / 2011
	Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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:
Amount of Each Disbursement this Period 4.98	

B. Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37699 Date of Disbursement MM / DD / YYYY 06 / 13 / 2011
	Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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:
Amount of Each Disbursement this Period 4.64	

C. Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37700 Date of Disbursement MM / DD / YYYY 06 / 14 / 2011
	Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees 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:
Amount of Each Disbursement this Period 14.77	

SUBTOTAL of Disbursements This Page (optional) ▶	24.39
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.37701 Date of Disbursement 06 / 15 / 2011
	Amount of Each Disbursement this Period 10.74 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.37703 Date of Disbursement 06 / 16 / 2011
	Amount of Each Disbursement this Period 28.35 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Paypal Mailing Address 4100 Solutions Center 774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.37704 Date of Disbursement 06 / 17 / 2011
	Amount of Each Disbursement this Period 4.73 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	43.82
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37705 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="2.16"/>
	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) Paypal	Transaction ID: SB21B.37706 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="5.61"/>
	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) Paypal	Transaction ID: SB21B.37820 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="1.52"/>
	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="9.29"/>
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

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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37821</p> <p>Date of Disbursement 06 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 12.55</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37822</p> <p>Date of Disbursement 06 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 48.99</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37823</p> <p>Date of Disbursement 06 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 92.63</p>

SUBTOTAL of Disbursements This Page (optional) ▶

154.17

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37824 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="22.73"/>
	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) Paypal	Transaction ID: SB21B.37825 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="9.78"/>
	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) Paypal	Transaction ID: SB21B.37826 Date of Disbursement
	Mailing Address 4100 Solutions Center 774100	<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees	<input type="text" value="-20.83"/>
	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="11.68"/>
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)
HUCK PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37827</p> <p>Date of Disbursement 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 89.43</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37828</p> <p>Date of Disbursement 06 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 94.84</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 4100 Solutions Center 774100</p> <p>City Chicago State IL Zip Code 60677</p> <p>Purpose of Disbursement Credit Card Processing Fees</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: SB21B.37829</p> <p>Date of Disbursement 06 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 114.89</p>

SUBTOTAL of Disbursements This Page (optional) ▶

299.16

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: SB21B.37830 Date of Disbursement 06 / 30 / 2011
	Mailing Address 4100 Solutions Center 774100	Amount of Each Disbursement this Period 242.41
	City Chicago State IL Zip Code 60677	
	Purpose of Disbursement Credit Card Processing Fees	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) Kristin Pelphrey	Transaction ID: SB21B.4468 Date of Disbursement 04 / 29 / 2011
	Mailing Address 5765 Bozeman No. 2201	Amount of Each Disbursement this Period 6078.82
	City Plano State TX Zip Code 75024	
	Purpose of Disbursement Consulting - Fundraising	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) Kristin Pelphrey	Transaction ID: SB21B.4470 Date of Disbursement 05 / 26 / 2011
	Mailing Address 5765 Bozeman No. 2201	Amount of Each Disbursement this Period 450.00
	City Plano State TX Zip Code 75024	
	Purpose of Disbursement Consulting - Fundraising	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)	6771.23
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Premier Marketing	Transaction ID: SB21B.4321 Date of Disbursement
	Mailing Address 109 International Drive Suite 300	<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City Franklin State TN Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising Expense - PAC Fundraising Candidate Name	<input type="text" value="324.00"/>
	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) Premier Marketing	Transaction ID: SB21B.4323 Date of Disbursement
	Mailing Address 109 International Drive Suite 300	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Franklin State TN Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising Expense - PAC Fundraising & Direct Mail Postage Candidate Name	<input type="text" value="2521.00"/>
	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) Premier Marketing	Transaction ID: SB21B.37713 Date of Disbursement
	Mailing Address 109 International Drive Suite 300	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City Franklin State TN Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising Expense - PAC Fundraising Candidate Name	<input type="text" value="344.00"/>
	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="3189.00"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) QualChoice <hr/> Mailing Address 10825 Financial Centre Parkway <hr/> City Little Rock State AR Zip Code 72211 <hr/> Purpose of Disbursement Insurance Premiums Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4236 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 1
	Amount of Each Disbursement this Period 161.73
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) QualChoice <hr/> Mailing Address 10825 Financial Centre Parkway <hr/> City Little Rock State AR Zip Code 72211 <hr/> Purpose of Disbursement Insurance Premiums Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4296 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 1 1
	Amount of Each Disbursement this Period 161.73
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) QualChoice <hr/> Mailing Address 10825 Financial Centre Parkway <hr/> City Little Rock State AR Zip Code 72211 <hr/> Purpose of Disbursement Insurance Premiums Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4392 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 161.73
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	485.19
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) QualChoice Mailing Address 10825 Financial Centre Parkway City Little Rock State AR Zip Code 72211 Purpose of Disbursement Insurance Premiums 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) ▼	Transaction ID: SB21B.4454 Date of Disbursement 05 / 26 / 2011
	Amount of Each Disbursement this Period 161.73

B. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent 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) ▼	Transaction ID: SB21B.4198 Date of Disbursement 02 / 04 / 2011
	Amount of Each Disbursement this Period 750.00

C. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent 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) ▼	Transaction ID: SB21B.4251 Date of Disbursement 03 / 03 / 2011
	Amount of Each Disbursement this Period 750.00

SUBTOTAL of Disbursements This Page (optional) ▶	1661.73
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4330 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 750.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4427 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 1 1
	Amount of Each Disbursement this Period 750.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Safe Foods Mailing Address 4801 North Shore Drive City North Little Rock State AR Zip Code 72118 Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.37681 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 750.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
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)
HUCK PAC

A.

Full Name (Last, First, Middle Initial)
Security BankCard Center

Transaction ID: SB21B.4374
Date of Disbursement

Mailing Address P.O. Box 6139

/ /

City State Zip Code
Norman OK 73070

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Payment - See Memos

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Security BankCard Center

Transaction ID: SB21B.4375
Date of Disbursement

Mailing Address P.O. Box 6139

/ /

City State Zip Code
Norman OK 73070

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Payment - See Memos

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Staples

Transaction ID: SB21B.4375.1
Date of Disbursement

Mailing Address 500 Staples Dr.

/ /

City State Zip Code
Framingham MA 01702

Amount of Each Disbursement this Period

Purpose of Disbursement
Office Expense - Supplies

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Security BankCard Center	Transaction ID: SB21B.4376 Date of Disbursement
	Mailing Address P.O. Box 6139	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Norman State OK Zip Code 73070	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment - See Memos	<input type="text" value="1582.81"/>
	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) US Post Office	Transaction ID: SB21B.4376.0 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="236.40"/>
	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) US Post Office	Transaction ID: SB21B.4376.1 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="1.76"/>
	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="1582.81"/>
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Dish Network	Transaction ID: SB21B.4376.2 Date of Disbursement
	Mailing Address Department 0063	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Expense - Utilities	<input type="text" value="99.24"/>
	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.4376.3 Date of Disbursement
	Mailing Address 500 Staples Dr.	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Framingham State MA Zip Code 01702	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Expense - Supplies	<input type="text" value="7.12"/>
	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) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.4376.4 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="47.68"/>
	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) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) US Post Office Mailing Address 600 E. Capitol Avenue City Little Rock State AR Zip Code 72202 Purpose of Disbursement Postage - PAC Operations 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) ▼	Transaction ID: SB21B.4376.5 Date of Disbursement 03 / 30 / 2011
	Amount of Each Disbursement this Period 15.90 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) American Airlines Mailing Address 4333 Amon Carter Boulevard City Fort Worth State TX Zip Code 76155 Purpose of Disbursement Travel 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) ▼	Transaction ID: SB21B.4376.6 Date of Disbursement 03 / 30 / 2011
	Amount of Each Disbursement this Period 319.10 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) American Airlines Mailing Address 4333 Amon Carter Boulevard City Fort Worth State TX Zip Code 76155 Purpose of Disbursement Travel 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) ▼	Transaction ID: SB21B.4376.7 Date of Disbursement 03 / 30 / 2011
	Amount of Each Disbursement this Period 492.80 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) US Post Office Mailing Address 600 E. Capitol Avenue City Little Rock State AR Zip Code 72202 Purpose of Disbursement Postage - PAC Operations Candidate Name	Transaction ID: SB21B.4376.8 Date of Disbursement MM / DD / YYYY 03 / 30 / 2011
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) ▼	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr. City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Expense - Supplies Candidate Name	Transaction ID: SB21B.4376.9 Date of Disbursement MM / DD / YYYY 03 / 30 / 2011
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) ▼	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Amazon.com Mailing Address 1200 12th Ave. South Ste. 1200 City Seattle State WA Zip Code 98144-2734 Purpose of Disbursement Office Expense - Supplies Candidate Name	Transaction ID: SB21B.4376.11 Date of Disbursement MM / DD / YYYY 03 / 30 / 2011
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) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Security BankCard Center	Transaction ID: SB21B.37795
	Mailing Address P.O. Box 6139	Date of Disbursement 04 / 28 / 2011
	City Norman State OK Zip Code 73070	Amount of Each Disbursement this Period 692.21
	Purpose of Disbursement Credit Card Payment - See Memos	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) US Post Office	Transaction ID: SB21B.37795.1
	Mailing Address 600 E. Capitol Avenue	Date of Disbursement 04 / 28 / 2011
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period 4.95
	Purpose of Disbursement Postage - PAC Operations	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.37795.5
	Mailing Address 600 E. Capitol Avenue	Date of Disbursement 04 / 28 / 2011
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period 52.90
	Purpose of Disbursement Postage - PAC Operations	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	692.21
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Dish Network	Transaction ID: SB21B.37795.6 Date of Disbursement
	Mailing Address Department 0063	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City Palatine State IL Zip Code 60055	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Expense - Utilities	<input type="text" value="107.73"/>
	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.37795.7 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="53.22"/>
	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) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Security BankCard Center	Transaction ID: SB21B.4439 Date of Disbursement
	Mailing Address P.O. Box 6139	<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City Norman State OK Zip Code 73070	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment - See Memos	<input type="text" value="2073.44"/>
	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="2073.44"/>
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) US Post Office Mailing Address 600 E. Capitol Avenue City Little Rock State AR Zip Code 72202 Purpose of Disbursement Postage - PAC Operations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4439.0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 186.69 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) US Post Office Mailing Address 600 E. Capitol Avenue City Little Rock State AR Zip Code 72202 Purpose of Disbursement Postage - PAC Operations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4439.1 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 2.38 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) US Post Office Mailing Address 600 E. Capitol Avenue City Little Rock State AR Zip Code 72202 Purpose of Disbursement Postage - PAC Operations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4439.3 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 179.82 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial)
Dish Network

Mailing Address Department 0063

City Palatine State IL Zip Code 60055

Purpose of Disbursement Office Expense - Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.4439.4
Date of Disbursement 05 / 11 / 2011

Amount of Each Disbursement this Period 107.73

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 600 E. Capitol Avenue

City Little Rock State AR Zip Code 72202

Purpose of Disbursement Postage - PAC Operations

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.4439.5
Date of Disbursement 05 / 11 / 2011

Amount of Each Disbursement this Period 21.59

[MEMO ITEM]

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

Mailing Address 500 Staples Dr.

City Framingham State MA Zip Code 01702

Purpose of Disbursement Office Expense - Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.4439.6
Date of Disbursement 05 / 11 / 2011

Amount of Each Disbursement this Period 235.67

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) US Post Office <hr/> Mailing Address 600 E. Capitol Avenue <hr/> City Little Rock State AR Zip Code 72202 <hr/> Purpose of Disbursement Postage - PAC Operations Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4439.7 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 31.40
	[MEMO ITEM]
	Category/ Type
	[]

B. Full Name (Last, First, Middle Initial) Delta Air <hr/> Mailing Address 1030 Delta Blvd. <hr/> City Atlanta State GA Zip Code 30320 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4439.8 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 225.40
	[MEMO ITEM]
	Category/ Type
	[]

C. Full Name (Last, First, Middle Initial) Delta Air <hr/> Mailing Address 1030 Delta Blvd. <hr/> City Atlanta State GA Zip Code 30320 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4439.9 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 1 1
	Amount of Each Disbursement this Period 871.40
	[MEMO ITEM]
	Category/ Type
	[]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.4439.10 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="11.51"/>
	Candidate Name	[MEMO ITEM]
	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) US Post Office	Transaction ID: SB21B.4439.11 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="54.40"/>
	Candidate Name	[MEMO ITEM]
	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) US Post Office	Transaction ID: SB21B.4439.12 Date of Disbursement
	Mailing Address 600 E. Capitol Avenue	<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - PAC Operations	<input type="text" value="7.04"/>
	Candidate Name	[MEMO ITEM]
	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)

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Security BankCard Center	Transaction ID: SB21B.37876
	Mailing Address P.O. Box 6139	Date of Disbursement 06 / 30 / 2011
	City Norman State OK Zip Code 73070	Amount of Each Disbursement this Period 154.94
	Purpose of Disbursement Credit Card Payment - See Memos	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) SOUTH CAROLINA REPUBLICAN PARTY	Transaction ID: SB21B.37876.1
	Mailing Address P.O. BOX 12373	Date of Disbursement 06 / 30 / 2011
	City COLUMBIA State SC Zip Code 29211	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement Contribution	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.37876.3
	Mailing Address 600 E. Capitol Avenue	Date of Disbursement 06 / 30 / 2011
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period 8.41
	Purpose of Disbursement Postage - PAC Operations	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	154.94
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Mack's Prairie Wings Mailing Address 2335 Highway 63 North City Stuttgart State AR Zip Code 72160 Purpose of Disbursement Refund of Event Expense Incurred in 2010 Candidate Name	Transaction ID: SB21B.37876.4 Date of Disbursement MM / DD / YYYY 06 / 30 / 2011
	Amount of Each Disbursement this Period -1961.67 [MEMO ITEM]
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) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Mack's Prairie Wings Mailing Address 2335 Highway 63 North City Stuttgart State AR Zip Code 72160 Purpose of Disbursement Event Expense Candidate Name	Transaction ID: SB21B.37876.5 Date of Disbursement MM / DD / YYYY 06 / 30 / 2011
	Amount of Each Disbursement this Period 261.56 [MEMO ITEM]
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) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Hertz Rent-a-Car Mailing Address 3000 Aviation Way City Columbia State SC Zip Code 29170 Purpose of Disbursement Travel Candidate Name	Transaction ID: SB21B.37876.6 Date of Disbursement MM / DD / YYYY 06 / 30 / 2011
	Amount of Each Disbursement this Period 1332.11 [MEMO ITEM]
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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
HUCK PAC

A.	Full Name (Last, First, Middle Initial) Security BankCard Center	Transaction ID: SB21B.37877
	Mailing Address P.O. Box 6139	Date of Disbursement 06 / 30 / 2011
	City Norman State OK Zip Code 73070	Amount of Each Disbursement this Period 172.63
	Purpose of Disbursement Credit Card Payment - See Memos	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) US Post Office	Transaction ID: SB21B.37877.0
	Mailing Address 600 E. Capitol Avenue	Date of Disbursement 06 / 30 / 2011
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period 40.45
	Purpose of Disbursement Postage - PAC Operations	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.37877.1
	Mailing Address 600 E. Capitol Avenue	Date of Disbursement 06 / 30 / 2011
	City Little Rock State AR Zip Code 72202	Amount of Each Disbursement this Period 22.95
	Purpose of Disbursement Postage - PAC Operations	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	172.63
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) Dish Network <hr/> Mailing Address Department 0063 <hr/> City Palatine State IL Zip Code 60055 <hr/> Purpose of Disbursement Office Expense-Utilities Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.37877.2 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 107.73
	[MEMO ITEM]
	Category/ Type
	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) US Post Office <hr/> Mailing Address 600 E. Capitol Avenue <hr/> City Little Rock State AR Zip Code 72202 <hr/> Purpose of Disbursement Postage - PAC Operations Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.37877.3 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 1.50
	[MEMO ITEM]
	Category/ Type
	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) TCPrint Solutions <hr/> Mailing Address 4150 East 43rd Street <hr/> City North Little Rock State AR Zip Code 72117-2502 <hr/> Purpose of Disbursement Office Expense - Printing Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4464 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 1 1
	Amount of Each Disbursement this Period 476.89
	[MEMO ITEM]
	Category/ Type
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	476.89
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)
HUCK PAC

A. Full Name (Last, First, Middle Initial) US Post Office <hr/> Mailing Address 600 E. Capitol Avenue <hr/> City Little Rock State AR Zip Code 72202 <hr/> Purpose of Disbursement Postage - PAC Operations Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4268 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2011
	Amount of Each Disbursement this Period 500.00
B. Full Name (Last, First, Middle Initial) US Post Office <hr/> Mailing Address 600 E. Capitol Avenue <hr/> City Little Rock State AR Zip Code 72202 <hr/> Purpose of Disbursement Postage - PAC Operations Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.4286 Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2011
	Amount of Each Disbursement this Period 70.00

SUBTOTAL of Disbursements This Page (optional) ►

570.00

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

291189.87

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
HUCK PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Holtzman Vogel, PLLC

Nature of Debt (Purpose):
Consulting - Legal

Mailing Address 45 North Hill Drive
Suite 100

City State ZIP Code
Warrenton VA 20186

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.40673

Amount Incurred This Period

10170.00

Payment This Period

4816.25

Outstanding Balance at Close of This Period

5353.75

1) **SUBTOTALS** This Period This Page (optional)..... ▶

5353.75

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

5353.75

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

5353.75