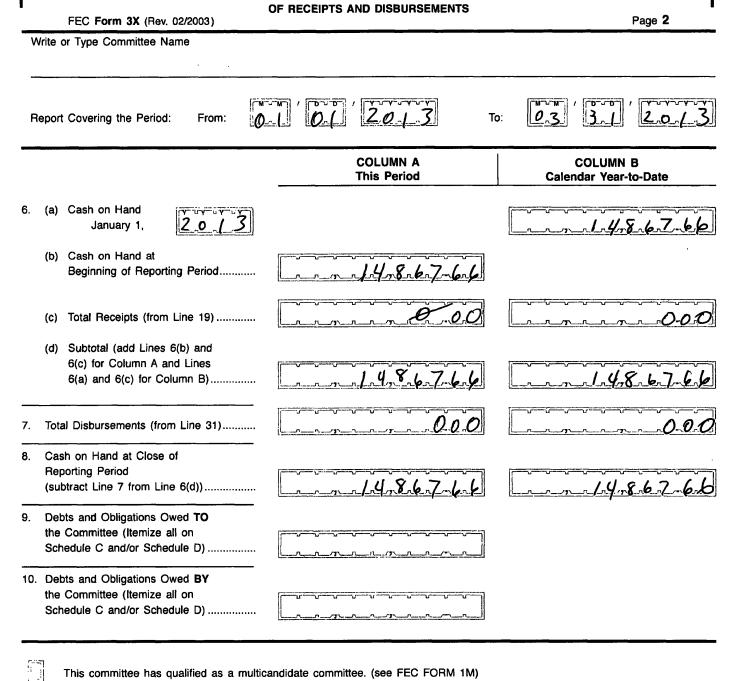
FEC FORM 3X	A	ND DIS	OF RE BURSE An Authorize	MENT	s		2013 APR 16	EIVED AMII:47
1. NAME OF COMMITTEE (in 1		PE OR PRINT	··	ample: If typi er the lines.	ing, type	12FE4M5		CENTLR
ADDRESS (number and Check if differ than previous reported. (AC 2. FEC IDENTIFICA	i street) 7 rent 2 Sty C) 2 ATION NUME		BIEIRIEINIEI CITY 3. IS THIS BEPORT	41 Diri 41 Diri Gairidi Gairidi		иці іте LFL STATE ▲		
July 15 Quarterly October	orts: Report (Q1) Report (Q2) 15 Report (Q3)		Feb 20 (M2 Mar 20 (M3 Apr 20 (M4 Apr 20 (M4 Section tor the:	> [] > []	May 20 (M5) Jun 20 (M6) Jul 20 (M7) P)	Aug	20 (M8)	11 11
July 31 M Report (N Year Only	Non-election y) (MY) on Report	Report	Election	General (30		 Runoff (; 	in the State	Special (30S)
5. Covering Period I certify that I have ex Type or Print Name of Signature of Treasurer NOTE: Submission of fa	Treasurer	leport and to the Gary	Sayers		D.	ate OY	09	2.0.1.3
Office Use Only	aise, erroneous	, or incomplete	information may s		rson signing th	is Report to the	FEC FOI Rev. 12/	RM 3X

i

FE6AN026



SUMMARY PAGE

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	
FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Write or Type Committee Name		OA C
<u>G4S</u> Governm	rent Solutions for	YAC
	1 01 201 3 T	
Report Covering the Period: From:	<u> </u>	» 0.3 3.1 ZO13
I. Receipts	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)		
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)		
(b) Political Party Committees	L_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r	L
(c) Other Political Committees		
(such as PACs)	Lange man man and a second	
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)►	<u> </u>	<u>L_r_r_r_r_r_r_rO-O</u> rO
12. Transfers From Affiliated/Other		
Party Committees	<u></u>	L_r_r_r_r_r_r_r_r_l
13. All Loans Received		
	[	<u></u>
14. Loan Repayments Received		
15. Offsets To Operating Expenditures	L_r_r_r_r_r_r_r_r_	L_r_r_r_r_r_l
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made	[////////.	
to Federal Candidates and Other		
Political Committees	<u> </u>	
17. Other Federal Receipts		
(Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(a) Total Transform (add 19(a) and 19(b))		
(c) Total Transfers (add 18(a) and 18(b))	L_r_r_r_r_r_r_r_	L
19. Total Receipts (add Lines 11(d),	[	
12, 13, 14, 15, 16, 17, and 18(c)) ►		
	Fina and a second s	
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►		Lange and the second

-

.

FE6AN026

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

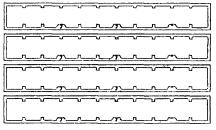
Page 4
COLUMN B

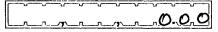
#### Calendar Year-to-Date

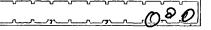
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period
	Activity (from Schedule H4)	
	(i) Federal Share	L
	(ii) New Federal Obere	
	(ii) Non-Federal Share	L
	(b) Other Federal Operating	
	Expenditures	
	(c) Total Operating Expenditures	
	(add 21(a)(i), (a)(ii), and (b)) ▶	//
22.	Transfers to Affiliated/Other Rarty	
	Committees	
23.	Contributions to Federal Candidates/Committees	
	and Other Political Committees	//
24.	Independent Expenditures	
	(use Schedule E)	
25.	Ceordinated Party Expenditures	
	(2 U.S.C. §441a(d)) (use Schedule F)	
26.	Loan Repayments Mede	
27.	Loans Made	
28.	Refunds of Contributions To:	
	(a) Individuals/Persons Other Than Political Committees	
	(b) Political Party Committees	
	(c) Other Political Committees	<u><u> </u></u>
	(such as PACs)	[
		L
	(d) Total Contribution Refunds	
	(add Lines 28(a), (b), and (c)) ►	
29.	Other Disbursements	
		<u>[</u>
30.	Federal Election Activity (2 U.S.C. §431(20))	
	(a) Allocated Federal Election Activity	
	(from Schedule H6)	
	(i) Federal Share	
	(ii) "Levin" Share	
	(b) Federal Election Activity Paid Entirely	
	With Federal Funds	
	(c) Total Federal Election Activity (add	
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	
	Total Disbursements (add Lines 21(c), 22,	<u></u>
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	$\square$
32.	Total Federal Disbursements	
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	
	from Line 31)	
		·

\_\_\_\_\_ ------<u>\_\_\_\_</u>\_\_\_ -7 ----- T-л л /m ~ ---------------- - -..n. 57 -7 57 5 5 12. <u>r.</u> <u>\_\_\_</u>\_\_\_ ũ -7 **73**\ л. m л. /J\ л ∕7 \_л /r 15 15 m. \_n. <u>\_n</u> -17 ŭ ./**n** .л

		-7	 _n	~~- ^}_		~~	~~	
=			 		~~~~			لے
L_r_	n	/n_	 ^	<u>m</u>			<u></u>	ل

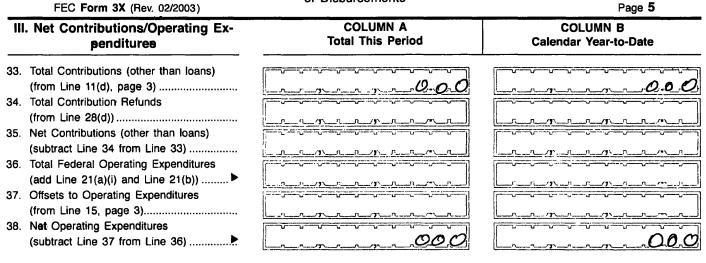






### DETAILED SUMMARY PAGE

of Disbursements



FE6AN026

S	CHEDULE A (FEC Form 3X)	:			FOR LINE NUMBER: PAGE / OF				
			Use separate schedu for each category of		(check only one)				
			Detailed Summery P		11a 11b 11c 12				
_					13 14 15 16 17				
A	ny information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used t	by any pers	son for the purpose of soliciting contributions				
H <sub>o</sub>		name and a	iouress of any political c		o sonon dominiputions irona such committee.				
$ \rangle$	NAME OF COMMITTEE (In Full)	<u>~ · ·</u>	1 -		$\mathcal{O}$				
V	GUS Government	Salu	ctions In	IC.	PAC				
Ľ	Full Name (Last, First, Middle Initial)		(						
Α.					Date of Receipt				
	Mailing Address				(התהתהש) (בתפ) (התהש)				
	City	State	Zip Code						
	City	State			Arnount of Each Receipt this Period				
		j <u></u>		 ]					
	FEC ID number of contributing federal political committee.	C	<sup>,</sup> ",						
		Occupation							
	Name of Employer	Occupation	I						
	Receipt For:	Aggreget -	Voor to Doto =		4				
	Primary General		Year-to-Date ▼						
	Other (specify) 🔻	1		/ID . 1					
_		Lang agend rates and rates of							
_	Full Name (Last, First, Middle Initial)								
В.					Date of Receipt				
	Mailing Address								
	City	State	Zip Code						
	·				Amount of Each Receipt this Period				
	FEC ID number of contributing	C		ח					
	federal political committee.		<u></u>						
	Name of Employer	Occupation			4				
	Receipt For:	Aggregate	Year-to-Date V		1				
	Primary General			<u></u>					
	Other (specify)	( <u> </u>	<u>Arran</u>	<u>^</u>	1				
	Full Name (Loot First Adiable Initial)				······				
C.	Full Name (Last, First, Middle Initial)				Date of Receipt				
Ο.	Mailing Address		····						
	City	State	Zip Code						
	·		·····		Amount of Each Receipt this Period				
	FEC ID number of contributing	С		ן					
	federal political coordinatee.		<u></u>	<u>_</u>					
			1		]				
				4					
	Receipt For:     Aggregate       Primary     General       Other (specify) ▼		Year-to-Date <b>V</b>						
			~ <u>``</u>						
		<u> ln</u> n	_/ji/j`ii	<u></u>					
Г									
s	UBTOTAL of Receipts This Page (optional)	000							
$\vdash$				· · · · ·					
ין	OTAL This Period (last page this line number o	nly)		•••••• •	<u> </u>				

SCHEDULE B (FEC Form 3X)					F	DR I			 R:		P/	AGE	70	DF 7		
ITEMIZED DISBURSEMENTS				arate schedule(s category of the		-	k only	one)		<b>د</b> ۲			1.25			
			Summary Page		$\left  - \right $	21b 27	22 28a	$\downarrow$	23 28b	24	-	25 29	26 30b			
Ar or	y information copied fro for commercial purpose	om such Reports a es, other than using	nd Statem g the nam	nents may r le and addr	not be sold or u ress of any polit	sed by ical con	any	perso tee to	n for th	e pui contril	rpose obutions	of soliciti from su	ng co Ich co	ntribu ommitt	tions ee	
Ν	NAME OF COMMITTE						_									
Z	GUS GOC Full Name (Last, First,	vern mont	Sol	ition.	s. Inc.		Ľ	<u>4C</u>								
Α.									Date of Disbursement							
	Mailing Address										Ľ_			<u> </u>		
	City		S	State	Zip Code											
	Purpose of Disburseme	ent							Amount of Each Disbursement this Period					Period		
	Candidate Name					Cate	egor ype	ry/				 				
	Office Sought:	House Senate President		nent For: Primary Other (spec	☐ General cify) <b>▼</b>											
	State: Distr				·····											
В.	Full Name (Last, First,								Date		isburse		<u>v u v</u>			
	Mailing Address					_										
	City		8	State	Zip Code											
	Purpose of Disburseme	ent						٦	Amount of Each Disbursement this Perio					Period		
	Candidate Name					Cate	egor ype	ry/								
	Office Sought:	House Senate President		nent For: Primary Other (spec	General											
	State: Dist	· · · · · · · · · · · · · · · · · · ·														
C.	Full Name (Last, First,	Middle Initial)									isburse		<u></u>			
	Mailing Address															
	City		5	State	Zip Code											
	Purpose of Disbursement								A		· •	Dishum			Devie	
	Candidate Name						Category/ Type		Amount of Each Disbursement this Period							
	Office Sought:	Senate President		nent For: Primary Other (spec	General cify) ▼	L			<u>.                                    </u>	/		<u></u> /	<u></u>		<u> </u>	
Γ		1							[							
s	UBTOTAL of Disburser	ments This Page (c	optional)							%	- <u>3</u>	<u></u>	<u></u>	_0.	0,Ø	
7	OTAL This Period (last	page this line num	nber only).							л.		<u></u>			00	

.

÷

SCHEDULE	С	(FEC	Form	3X)

		for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full)		_	
645 Governme	wt Solutions,	Inc PAC	
LOAN SOURCE Full Name (Last, F	irst, Middle Initial)		ection: Primary General
Mailing Address			Other (specify) 🔻
City	State ZIP	Code	
Original Amount of Loan	Cumulative Payment	To Date Balance	Outstanding at Close of This Peri
<del>المراجعة المراجعة ال</del>			<u>;</u>
TERMS			· · · · · · · · · · · · · · · · · · ·
			Secured:
List All Endorsers or Guarantors (i	• •	Name of Employer	
Mailing Address		Occupation	· · · · · · · · · · · · · · · · · · ·
City	State ZIP Code	Guaranteed University Outstanding:	
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	<u> </u>
Mailing Address	·	Occupation	
City	State ZIP Code	Guaranteed Outstanding:	_n/n
3. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle Init	ial)	Name of Employer	4. <u></u>
Mailing Address		Occupation	
		Amount	······································
City	State ZIP Code	Guaranteed Outstanding:	<u></u>
UBTOTALS This Period This Page (o	ptional)		
<b>DTALS</b> This Period (last page in this	line only)	····· •	<u></u>
arry outstanding balance only to LIN	E 3, Schedule D, for this line.	If no Schedule D, carry forward	to appropriate line of Summar

۰.

OF

PAGE

Use separate schedule(s)

1

# SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page \_\_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NIA	ME OF COMMITTEE (In Full)							
1974								
LE	NDING INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)				
Fu	I Name			%				
Ма	iling Address		[M-J-N	<u>سا ، (میں میں میں ا</u> ، ( <u>میں می</u> ) ، ( <u>ا</u>				
Cit	y State Zip Code	Date Incurred or Established	- [ <u> </u>					
0			l <u></u>					
	A. Has loan been restructured?	If yes, date originally incurre						
	B. If line of credit, Amount of this Draw:	Balance						
	C. Are other parties secondarily liable for the debt incurre No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)						
	D. Are any of the following pledged as collateral for the I property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other is the property of the property	deposit, chattel papers,		What is the value of this collateral?				
	No Yes If yes, specify:		Does the	lender have a perfected security				
			interest in					
	E. Are any future contributions or future receipts of intere- collateral for the loan? No Yes If yes, s							
	A depository account must be established pursuant to 11 CFR 100.82(o)(2) and 100.142(e)(2).	Location of account:	·	· · ·				
	Date account established:	Address:						
		City, State, Zip:						
	F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.							
	G. COMMITTEE TREASURER		DATE	· · · · · ·				
	Typed Name Signature	- <u></u>						
	H. Attach a signed copy of the loan agreement.							
	<ol> <li>TO BE SIGNED BY THE LENDING INSTITUTION:         <ol> <li>To the best of this institution's knowledge, the te are accurate as stated above.</li> <li>The loan was made on terms and conditions (ind similar extensions of credit to other borrowers of III. This institution is aware of the requirement that a</li> </ol> </li> </ol>	cluding interest rate) no more fa f comparable credit worthiness.	vorable at	the time than those imposed for				
	complied with the requirements set forto at 11 C	FR 100.82 and 100.142 in maki	ng this loa	in				
	THORIZED REPRESENTATIVE ped Name		DATE					
-	gnature Tit	le						

SCHEDULE D (FEC Form 3X)	(Use constate PAGE 7 OF 7
DEBTS AND OBLIGATIONS	(Use separate
Excluding Loans	for each (check only one) 9 numbered line)
NAME OF COMMITTEE (In Full)	
LIC CONTRACT L C/I T	PAC
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	
Outstanding Balance Beginning This Period	
Contraction of the Contraction	
Amount Incurred This Period Payment This Pe	eriod Outstanding Balance at Close of This Period
ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا	
	<u></u>
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment This Pe	wind Outstanding Balance at Close of This Period
Amount Incurred This Period Payment This Period	
langer and the second langer and the second	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	
Outstanding Balance Beginning This Period	,, · · · · · · · · · · · · · · · · · ·
Land and the second sec	
Amount Incurred This Period Payment This Period	Priod Outstanding Balance at Close of This Period
1) CURTOTAL & This Deviad This Dage (antised)	
1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	► <u>L0.0.0</u>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last	
and by and by and bary formatio to appropriate fine of Summary Page (last	

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMI The FEC added this page to the end of this filing to indica	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C) ۲/۱۵/۱3
USPS Priority Mail	Postmarked
Delivery Confirmation <sup>™</sup> or Signature Cor	nfirmation <sup>™</sup> Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busin	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of Other (Specify):	f Receipt or Postmarked
Amps	4/16/13
PREPARER (3/2005)	DATE PREPARED

ſ