



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**WOLF PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		5269.00
(b) Cash on Hand at Beginning of Reporting Period.....	5269.00	
(c) Total Receipts (from Line 19) .....	67616.01	67616.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	72885.01	72885.01
7. Total Disbursements (from Line 31).....	46296.28	46296.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	26588.73	26588.73
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**WOLF PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	26075.00	26075.00
(ii) Unitemized .....	41541.01	41541.01
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	67616.01	67616.01
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	67616.01	67616.01
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	67616.01	67616.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	67616.01	67616.01

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	46246.28	46246.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	46246.28	46246.28
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	50.00	50.00
(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)).....	50.00	50.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	46296.28	46296.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46296.28	46296.28

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	67616.01	67616.01
34. Total Contribution Refunds (from Line 28(d)) .....	50.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	67566.01	67566.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	46246.28	46246.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46246.28	46246.28

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 43
<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)  
**WOLF PAC**

**A. David Alexander**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6374 Greenway Rd  
City Fort Worth State TX Zip Code 76116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Student  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 28 / 2013**  
**Transaction ID : SA11AI.6507**  
Amount of Each Receipt this Period **50.00**

**B. David Alexander**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6374 Greenway Rd  
City Fort Worth State TX Zip Code 76116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Student  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**

Date of Receipt **06 / 28 / 2013**  
**Transaction ID : SA11AI.6508**  
Amount of Each Receipt this Period **50.00**

**C. Isaac Alvarez**  
Full Name (Last, First, Middle Initial)  
Mailing Address La Isla N31-12  
City Quito State ZZ Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Seller  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 14 / 2013**  
**Transaction ID : SA11AI.6009**  
Amount of Each Receipt this Period **250.00**  
Refund Issued 7/31/2013

**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: (check only one)	PAGE 7 OF 43
	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial) <b>A. Zachariah Bailey</b>		Date of Receipt
Mailing Address 145 amsterdam PI		<input type="text" value="01"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City madison	State AL	Zip Code 35758
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6024</b>
Name of Employer Walmart	Occupation supervisor	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 ▼	<input type="text" value="250.00"/>
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Sean Berrocales</b>		Date of Receipt
Mailing Address 28 Shepherd pl.		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City Kearny	State NJ	Zip Code 07032
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6530</b>
Name of Employer	Occupation	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 ▼	<input type="text" value="50.00"/>
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Sean Berrocales</b>		Date of Receipt
Mailing Address 28 Shepherd pl.		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City Kearny	State NJ	Zip Code 07032
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.6531</b>
Name of Employer	Occupation	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 ▼	<input type="text" value="50.00"/>
	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 8 OF 43
	<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)  
**WOLF PAC**

**A. Jason Bonsall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6517 Old Magnolia Ln  
City State Zip Code  
Mint Hill NC 28227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
none none  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 01 / 2013  
**Transaction ID : SA11AI.6054**  
Amount of Each Receipt this Period  
1000.00

**B. Jason Bonsall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6517 Old Magnolia Ln  
City State Zip Code  
Mint Hill NC 28227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
none none  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 19 / 2013  
**Transaction ID : SA11AI.6055**  
Amount of Each Receipt this Period  
1000.00

**C. William E Briggs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1030 Harbor Dr  
City State Zip Code  
St Paul Island AK 99660  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Trident Seafoods Manager  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 06 / 2013  
**Transaction ID : SA11AI.6063**  
Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**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 9 OF 43
	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Matthew Care**

Mailing Address 1425 Parkwood PI NW

City Washington State DC Zip Code 20010

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

Name of Employer Occupation  
na na

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
01 / 11 / 2013  
**Transaction ID : SA11AI.6073**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Cooper Clauson**

Mailing Address PO Box 95912

City Seattle State WA Zip Code 98145

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

Name of Employer Occupation  
Orora Design Technologies Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
01 / 01 / 2013  
**Transaction ID : SA11AI.6085**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**c. Christopher Day**

Mailing Address 423 Guyon Ave

City Staten Island State NY Zip Code 10306

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

Name of Employer Occupation  
self-employed deposition reporter

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
01 / 11 / 2013  
**Transaction ID : SA11AI.6106**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 10 OF 43
	<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)  
**WOLF PAC**

**A. Christopher Day**  
Full Name (Last, First, Middle Initial)  
Mailing Address 423 Guyon Ave  
City Staten Island State NY Zip Code 10306  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self-employed Occupation deposition reporter  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1050.00**

Date of Receipt **01 / 11 / 2013**  
**Transaction ID : SA11AI.6583**  
Amount of Each Receipt this Period **50.00**

**B. Christopher Day**  
Full Name (Last, First, Middle Initial)  
Mailing Address 423 Guyon Ave  
City Staten Island State NY Zip Code 10306  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self-employed Occupation deposition reporter  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1100.00**

Date of Receipt **02 / 11 / 2013**  
**Transaction ID : SA11AI.6584**  
Amount of Each Receipt this Period **50.00**

**C. Christopher Day**  
Full Name (Last, First, Middle Initial)  
Mailing Address 423 Guyon Ave  
City Staten Island State NY Zip Code 10306  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self-employed Occupation deposition reporter  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1150.00**

Date of Receipt **03 / 11 / 2013**  
**Transaction ID : SA11AI.6585**  
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 11 OF 43
<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial) <b>A. Christopher Day</b>		Date of Receipt MM / DD / YYYY 04 / 11 / 2013 <b>Transaction ID : SA11AI.6586</b>
Mailing Address 423 Guyon Ave		Amount of Each Receipt this Period 50.00
City Staten Island	State NY	Zip Code 10306
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation deposition reporter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) <b>B. Christopher Day</b>		Date of Receipt MM / DD / YYYY 04 / 28 / 2013 <b>Transaction ID : SA11AI.6107</b>
Mailing Address 423 Guyon Ave		Amount of Each Receipt this Period 100.00
City Staten Island	State NY	Zip Code 10306
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation deposition reporter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) <b>c. Christopher Day</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2013 <b>Transaction ID : SA11AI.6587</b>
Mailing Address 423 Guyon Ave		Amount of Each Receipt this Period 50.00
City Staten Island	State NY	Zip Code 10306
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation deposition reporter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

**A. Christopher Day**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 423 Guyon Ave  
 City Staten Island State NY Zip Code 10306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self-employed Occupation deposition reporter  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : SA11AI.6588**  
 Amount of Each Receipt this Period  
**50.00**

**B. Lawrence Dingee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 385 S Los Robles Ave Apt 15  
 City Pasadena State CA Zip Code 91101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Union Bank Occupation Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2013  
**Transaction ID : SA11AI.6118**  
 Amount of Each Receipt this Period  
**250.00**

**C. Benjamin Fieri**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5732 Michael St  
 City San Diego State CA Zip Code 92105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer T mobile Occupation Retail sales associate  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : SA11AI.6151**  
 Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **550.00**  
**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 13 OF 43
	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Stephen Garcia**

Mailing Address 50 Dey St  
Loft 439

City Jersey City State NJ Zip Code 07306

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

Name of Employer BFS Occupation Security

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 01 / 2013  
**Transaction ID : SA11AI.6605**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Stephen Garcia**

Mailing Address 50 Dey St  
Loft 439

City Jersey City State NJ Zip Code 07306

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

Name of Employer BFS Occupation Security

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 02 / 2013  
**Transaction ID : SA11AI.6606**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 50 Dey St  
Loft 439

City Jersey City State NJ Zip Code 07306

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

Name of Employer BFS Occupation Security

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 03 / 2013  
**Transaction ID : SA11AI.6607**

Amount of Each Receipt this Period  
100.00

**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: (check only one)	PAGE 14 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Stephen Garcia**

Mailing Address 50 Dey St  
Loft 439

City Jersey City State NJ Zip Code 07306

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

Name of Employer BFS Occupation Security

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
06 / 04 / 2013  
**Transaction ID : SA11AI.6608**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Raymond Giorgi**

Mailing Address 518 Shady Ave  
Apt 1

City Pittsburgh State PA Zip Code 15206

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

Name of Employer N/A Occupation Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
02 / 26 / 2013  
**Transaction ID : SA11AI.6168**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 1223 SW Catlin Crest Dr

City Portalnd State OR Zip Code 97225

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

Name of Employer self Occupation investor-environmentalist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
01 / 10 / 2013  
**Transaction ID : SA11AI.6197**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 OF 43  
(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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Don Husby**

Mailing Address 20711 NW Rockspring Ln

City Aloha State OR Zip Code 97006

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

Name of Employer Nvidia Occupation Nerd

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2013

**Transaction ID : SA11AI.6216**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Blaed Hutchinson**

Mailing Address 8200 W Manchester Ap1

City Playa del Rey State CA Zip Code 90293

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

Name of Employer Treyarch Occupation 3d Modeler

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2013

**Transaction ID : SA11AI.6218**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6100 Fairdale Ln Apt 35

City Houston State TX Zip Code 77057

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

Name of Employer Comcast Occupation Analyst

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2013

**Transaction ID : SA11AI.6238**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 16 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**WOLF PAC**

**A. Daniel Kraft**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 Saint James St  
 Apartment 206  
 City Richmond State VA Zip Code 23220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Health Diagnostic Laboratory Inc. Occupation Quality Assurance Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2013  
**Transaction ID : SA11AI.6248**  
 Amount of Each Receipt this Period  
**500.00**

**B. Cory Mahoney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 190 Parrish St  
 Apt 3  
 City Canandaigua State NY Zip Code 14424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Seitel Occupation Permitting for Seismic Testing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2013  
**Transaction ID : SA11AI.6278**  
 Amount of Each Receipt this Period  
**250.00**

**C. Farzad Mansouri**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5713 Rossmore Dr  
 City Bethesda State MD Zip Code 20814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self-employed Occupation IT technician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2013  
**Transaction ID : SA11AI.6282**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**WOLF PAC**

**A. Farzad Mazloomi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 634 Sycamore St  
 Apt 4R  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TriHealth Occupation Physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2013  
**Transaction ID : SA11AI.6667**  
 Amount of Each Receipt this Period  
**25.00**

**B. Farzad Mazloomi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 634 Sycamore St  
 Apt 4R  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TriHealth Occupation Physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013  
**Transaction ID : SA11AI.6668**  
 Amount of Each Receipt this Period  
**25.00**

**C. Mike Morgan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16106 Ozark Ave  
 City Tinley Park State IL Zip Code 60477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Student  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2013  
**Transaction ID : SA11AI.6302**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 43
	<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)  
**WOLF PAC**

**A. Mike Morgan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16106 Ozark Ave

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Student
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2013

**Transaction ID : SA11AI.6675**

Amount of Each Receipt this Period  
25.00

**B. Mike Morgan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16106 Ozark Ave

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Student
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2013

**Transaction ID : SA11AI.6676**

Amount of Each Receipt this Period  
25.00

**C. Mike Morgan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16106 Ozark Ave

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Student
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2013

**Transaction ID : SA11AI.6677**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 43  
(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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Mike Morgan**

Mailing Address 16106 Ozark Ave

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Student
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2013

**Transaction ID : SA11AI.6678**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. Mike Morgan**

Mailing Address 16106 Ozark Ave

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Student
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

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

**Transaction ID : SA11AI.6679**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 16106 Ozark Ave

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Student
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2013

**Transaction ID : SA11AI.6680**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 43
	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Jane Napier**

Mailing Address 605 Elm St

City Mauston State WI Zip Code 53948

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

Name of Employer self Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2013  
**Transaction ID : SA11AI.6314**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Davide Pio**

Mailing Address 109 Jade Ct

City Hercules State CA Zip Code 94547

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

Name of Employer BCRE Occupation Real Estate Broker - Commercial & Inve

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2013  
**Transaction ID : SA11AI.6340**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11713 Sanderson Rd

City Medina State NY Zip Code 14103

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

Name of Employer n/a Occupation n.a

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : SA11AI.6360**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 21 OF 43
	<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)  
**WOLF PAC**

**A. Peter Rinck**  
Full Name (Last, First, Middle Initial)

Mailing Address 175 Jordan Rd

City Buckfield State ME Zip Code 04220

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

Name of Employer Rinck Advertising, Inc. Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2013  
**Transaction ID : SA11AI.6362**

Amount of Each Receipt this Period  
 250.00

**B. Carlo Scalo**  
Full Name (Last, First, Middle Initial)

Mailing Address 675 Sharon Park Dr

City Menlo Park State CA Zip Code 94025

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

Name of Employer Stanford University Occupation Research Scholar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 06 / 2013  
**Transaction ID : SA11AI.6384**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address Smaragdstraat 13

City Antwerp State Zip Code 02600

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

Name of Employer N/A Occupation student

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 09 / 2013  
**Transaction ID : SA11AI.6389**

Amount of Each Receipt this Period  
 250.00

Refund Issued 7/31/2013

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 22 OF 43
	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael Shand**

Mailing Address 78 Hume St Upwey Melbourne Victori

City Melbourne	State ZZ	Zip Code
-------------------	-------------	----------

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

Name of Employer n/a	Occupation Software Tester
-------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	01	/	2013

**Transaction ID : SA11AI.6397**

Amount of Each Receipt this Period  
250.00

Refund Issued 7/31/2013

Full Name (Last, First, Middle Initial)  
**B. Michael Shand**

Mailing Address 78 Hume St Upwey Melbourne Victori

City Melbourne	State ZZ	Zip Code
-------------------	-------------	----------

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

Name of Employer n/a	Occupation Software Tester
-------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2013

**Transaction ID : SA11AI.6398**

Amount of Each Receipt this Period  
250.00

Refund Issued 7/31/2013

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

Mailing Address 78 Hume St Upwey Melbourne Victori

City Melbourne	State ZZ	Zip Code
-------------------	-------------	----------

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

Name of Employer n/a	Occupation Software Tester
-------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

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

**Transaction ID : SA11AI.6722**

Amount of Each Receipt this Period  
25.00

Refund Issued 7/31/2013

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Kris Shapar**

Mailing Address **CMR 480 Box 160**

City **Apo** State **AE** Zip Code **09128**

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

Name of Employer **ManTech** Occupation **IT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**01 / 12 / 2013**  
**Transaction ID : SA11AI.6401**

Amount of Each Receipt this Period  
**150.00**

Full Name (Last, First, Middle Initial)  
**B. Erik Sipman**

Mailing Address **2271 Prairie View Road**

City **Decorah** State **IA** Zip Code **52101-7860**

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**03 / 27 / 2013**  
**Transaction ID : SA11AI.6726**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **2271 Prairie View Road**

City **Decorah** State **IA** Zip Code **52101-7860**

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**04 / 27 / 2013**  
**Transaction ID : SA11AI.6727**

Amount of Each Receipt this Period  
**100.00**

**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: (check only one)	PAGE 24 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial) <b>A. Erik Sipman</b>		Date of Receipt MM / DD / YYYY 05 / 27 / 2013 <b>Transaction ID : SA11AI.6728</b>
Mailing Address 2271 Prairie View Road		Amount of Each Receipt this Period 100.00
City Decorah	State IA	
Zip Code 52101-7860		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Erik Sipman</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2013 <b>Transaction ID : SA11AI.6729</b>
Mailing Address 2271 Prairie View Road		Amount of Each Receipt this Period 100.00
City Decorah	State IA	
Zip Code 52101-7860		Aggregate Year-to-Date ▼ 600.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Eric Sorensen</b>		Date of Receipt MM / DD / YYYY 05 / 17 / 2013 <b>Transaction ID : SA11AI.6734</b>
Mailing Address 17165 Killarney Ct.		Amount of Each Receipt this Period 25.00
City Granger	State IN	
Zip Code 46530		Aggregate Year-to-Date ▼ 225.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cardno	Occupation IT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

**A. Eric Sorensen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17165 Killarney Ct.  
 City Granger State IN Zip Code 46530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cardno Occupation IT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2013  
**Transaction ID : SA11AI.6735**  
 Amount of Each Receipt this Period  
**250.00**

**B. Nick Sousa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Auburn St Ext Apt 3  
 City Framingham State MA Zip Code 01701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation IT Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2013  
**Transaction ID : SA11AI.6737**  
 Amount of Each Receipt this Period  
**100.00**

**C. Nick Sousa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Auburn St Ext Apt 3  
 City Framingham State MA Zip Code 01701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation IT Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013  
**Transaction ID : SA11AI.6738**  
 Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>225.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 26 OF 43  
(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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. robert stepan**

Mailing Address 411 Sand Bar

City Canyon Lake      State TX      Zip Code 78133

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

Name of Employer Self      Occupation IT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 12 / 2013  
**Transaction ID : SA11AI.6431**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. JOHN STERLING**

Mailing Address 210 CHEROKEE ROAD

City Asheville      State NC      Zip Code 28804-3802

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 M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2013  
**Transaction ID : SA11AI.6746**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 210 CHEROKEE ROAD

City Asheville      State NC      Zip Code 28804-3802

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 ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2013  
**Transaction ID : SA11AI.6747**

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: (check only one)	PAGE 27 OF 43
	<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	<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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Russ Stratton**

Mailing Address 285 W Broadway Suite 400  
Suite 400

City New York State NY Zip Code 10013

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

Name of Employer Self-Employed Occupation Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2013

Transaction ID : SA11AI.6437

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Stratyllis Inc.**

Mailing Address 6301 S 242nd PL  
apt 7-201

City Kent State WA Zip Code 98032

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2013

Transaction ID : SA11AI.6778

Amount of Each Receipt this Period  
50.00

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

Mailing Address 6301 S 242nd PL  
apt 7-201

City Kent State WA Zip Code 98032

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : SA11AI.6779

Amount of Each Receipt this Period  
50.00

**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: (check only one)	PAGE 28 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

Full Name (Last, First, Middle Initial) <b>A. The Young Turks, LLC</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2013 <b>Transaction ID : SA11AI.6781</b>
Mailing Address 3555 Hayden Ave 3rd Floor		Amount of Each Receipt this Period 4900.00
City Culver City	State CA	
Zip Code 90232		Aggregate Year-to-Date ▼ 4900.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Name of Employer		

Full Name (Last, First, Middle Initial) <b>B. The Young Turks, LLC</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2013 <b>Transaction ID : SA11AI.6782</b>
Mailing Address 3555 Hayden Ave 3rd Floor		Amount of Each Receipt this Period 100.00
City Culver City	State CA	
Zip Code 90232		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Name of Employer		

Full Name (Last, First, Middle Initial) <b>C. The Young Turks, LLC</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2013 <b>Transaction ID : SA11AI.6783</b>
Mailing Address 3555 Hayden Ave 3rd Floor		Amount of Each Receipt this Period 5000.00
City Culver City	State CA	
Zip Code 90232		Aggregate Year-to-Date ▼ 10000.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Name of Employer		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 29 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

**A. Kashi Vishwanath**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14012 NE 86th Ct  
 City Redmond State WA Zip Code 98052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Google Occupation Software engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : SA11AI.6467**  
 Amount of Each Receipt this Period  
 500.00

**B. Kevin Wallace**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1120 NW 56th St  
 City Seattle State WA Zip Code 98107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Google Occupation Software Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : SA11AI.6473**  
 Amount of Each Receipt this Period  
 1000.00

**C. Dane Ward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 760 CASIANO Dr APT A  
 City Santa Barbara State CA Zip Code 93105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BARDEX CORP Occupation IT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2013  
**Transaction ID : SA11AI.6760**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1550.00  
**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 OF 43  
(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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)  
**A. Dane Ward**

Mailing Address 760 CASIANO Dr  
APT A

City Santa Barbara State CA Zip Code 93105

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

Name of Employer BARDEX CORP Occupation IT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 05 / 2013  
Transaction ID : SA11AI.6761

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Will Waters**

Mailing Address 2470 Forest Lakes Ln

City Sterrett State AL Zip Code 35147

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

Name of Employer Regions Bank Occupation Software Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 08 / 2013  
Transaction ID : SA11AI.6476

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	26075.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Administrative Business Services**

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code  
District Heights MD 20747

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2013

**Transaction ID : SB21B.5957**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Administrative Business Services**

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code  
District Heights MD 20747

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2013

**Transaction ID : SB21B.5973**

Amount of Each Disbursement this Period

410.00

Full Name (Last, First, Middle Initial)

**C. Administrative Business Services**

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code  
District Heights MD 20747

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2013

**Transaction ID : SB21B.5979**

Amount of Each Disbursement this Period

340.00

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Administrative Business Services**

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code  
District Heights MD 20747

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
06 / 07 / 2013

**Transaction ID : SB21B.5982**

Amount of Each Disbursement this Period

410.00

Full Name (Last, First, Middle Initial)

**B. Administrator, Unemployment Compensation**

Mailing Address CT Department of Labor  
200 Folly Brook Blvd

City State Zip Code  
Wethersfield CT 06109

Purpose of Disbursement  
Employee Compensation Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
04 / 02 / 2013

**Transaction ID : SB21B.5968**

Amount of Each Disbursement this Period

630.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 5800 Windward Parkway

City State Zip Code  
Alpharetta GA 30005

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
06 / 03 / 2013

**Transaction ID : SB21B.5990**

Amount of Each Disbursement this Period

2817.31

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

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

3857.31

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement  
Payroll Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2013

**Transaction ID : SB21B.5991**

Amount of Each Disbursement this Period

80.20

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : SB21B.5986**

Amount of Each Disbursement this Period

62.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : SB21B.5995**

Amount of Each Disbursement this Period

62.00

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

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

204.20

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SB21B.5992**

Amount of Each Disbursement this Period

2760.31

Full Name (Last, First, Middle Initial)

**B. Ryan Clayton**

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : SB21B.5965**

Amount of Each Disbursement this Period

3393.00

Full Name (Last, First, Middle Initial)

**C. Ryan Clayton**

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : SB21B.5967**

Amount of Each Disbursement this Period

5000.00

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

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

11153.31

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Ryan Clayton**

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2013

**Transaction ID : SB21B.5980**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Ryan Clayton**

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2013

**Transaction ID : SB21B.5989**

Amount of Each Disbursement this Period

3573.25

Full Name (Last, First, Middle Initial)

**C. Ryan Clayton**

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SB21B.5994**

Amount of Each Disbursement this Period

3573.25

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

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

12146.50

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine**

Mailing Address 2125 14TH STREET NW #101W

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SB21B.5996**

Amount of Each Disbursement this Period

1649.42

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Web Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2013

**Transaction ID : SB21B.5960**

Amount of Each Disbursement this Period

78.38

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Web Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2013

**Transaction ID : SB21B.5970**

Amount of Each Disbursement this Period

85.00

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

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

1812.80

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Web Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2013

**Transaction ID : SB21B.5974**

Amount of Each Disbursement this Period

85.00

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Web Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

**Transaction ID : SB21B.5981**

Amount of Each Disbursement this Period

92.88

Full Name (Last, First, Middle Initial)

**C. David Koller**

Mailing Address 1041 S. Corning St.  
Apt #101

City Los Angeles State CA Zip Code 90035

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2013

**Transaction ID : SB21B.5959**

Amount of Each Disbursement this Period

400.00

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

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

577.88

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. New Organizing Institute**

Mailing Address 1133 19th Street, NW  
Suite 850

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5959.0**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5948**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.5956**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2013

**Transaction ID : SB21B.5962**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2013

**Transaction ID : SB21B.5963**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2013

**Transaction ID : SB21B.5964**

Amount of Each Disbursement this Period

2500.00

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

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

4000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2013

**Transaction ID : SB21B.5972**

Amount of Each Disbursement this Period

296.17

Full Name (Last, First, Middle Initial)

**B. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2013

**Transaction ID : SB21B.5978**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 01 / 2013

**Transaction ID : SB21B.5988**

Amount of Each Disbursement this Period

1923.19

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

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

4719.36

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Monetta**

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SB21B.5993**

Amount of Each Disbursement this Period

1923.19

Full Name (Last, First, Middle Initial)

**B. Nationbuilder**

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement  
Website

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2013

**Transaction ID : SB21B.5946**

Amount of Each Disbursement this Period

260.00

Full Name (Last, First, Middle Initial)

**C. Nationbuilder**

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement  
Website

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2013

**Transaction ID : SB21B.5955**

Amount of Each Disbursement this Period

260.00

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

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

2443.19

**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)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Nationbuilder**

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement  
Website

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2013

**Transaction ID : SB21B.5961**

Amount of Each Disbursement this Period

260.00

Full Name (Last, First, Middle Initial)

**B. Nationbuilder**

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement  
Website

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 08 / 2013

**Transaction ID : SB21B.5971**

Amount of Each Disbursement this Period

260.00

Full Name (Last, First, Middle Initial)

**C. Nationbuilder**

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement  
Website

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2013

**Transaction ID : SB21B.5975**

Amount of Each Disbursement this Period

260.00

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

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

780.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**WOLF PAC**

Full Name (Last, First, Middle Initial)

**A. Nationbuilder**

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement  
Website

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 10 / 2013

**Transaction ID : SB21B.5983**

Amount of Each Disbursement this Period

260.00

Full Name (Last, First, Middle Initial)

**B. New Haven People's Center**

Mailing Address 37 Howe Center

City New Haven State CT Zip Code 06511

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2013

**Transaction ID : SB21B.5953**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SB21B.5997**

Amount of Each Disbursement this Period

835.95

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

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

1345.95

45565.64