

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

BRINGING LEADERSHIP BACK PAC

ADDRESS (number and street) PO BOX 2246  
 Check if different than previously reported. (ACC)  
 WATERLOO IA 50704

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00448472

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT**  
(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |                                                                |
|--------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |                                           |                                        |                                       |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post -Election** Report for the:
- |                                        |                                       |                                        |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 10 15 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Tully

Signature of Treasurer Electronically Filed by Robert Tully Date 01 30 2010

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
BRINGING LEADERSHIP BACK PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		2631.25
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	6428.70									
(c) Total Receipts (from Line 19) .....	15005.24	40005.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	21433.94	42636.49								
7. Total Disbursements (from Line 31) .....	18400.37	39602.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3033.57	3033.57								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
BRINGING LEADERSHIP BACK PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	1000.00	1000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1000.00	1000.00
(b) Political Party Committees .....	5.24	5.24
(c) Other Political Committees (such as PACs) .....	14000.00	39000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	15005.24	40005.24
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	15005.24	40005.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15005.24	40005.24

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4400.37	5402.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4400.37	5402.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	34000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18400.37	39602.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18400.37	39602.92

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	15005.24	40005.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15005.24	40005.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4400.37	5402.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4400.37	5402.92

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 16	
	(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"/> 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)  
BRINGING LEADERSHIP BACK PAC

A.

Full Name (Last, First, Middle Initial) Jon Haber		Date of Receipt
Mailing Address 4914 43rd St NW		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20016
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4336
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cascade Strategies		<input type="text" value="1000.00"/>
Occupation Principal		Contribution
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" 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)  
BRINGING LEADERSHIP BACK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt
	Mailing Address 430 South Capitol Street, SE 2nd Floor		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Washington	State DC	Zip Code 20003
	FEC ID number of contributing federal political committee. <b>C</b> C00000935		Transaction ID: SA11B.4400
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5.24"/>  In-kind - PAC Fundraising Services	
Aggregate Year-to-Date ▼		<input type="text" value="5.24"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5.24"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5.24"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
BRINGING LEADERSHIP BACK PAC

**A.**

Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6th Street, NW  
Suite 200

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

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

Transaction ID: SA11C.4335

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION, ACTIVE BALLOT CLUB

Mailing Address 1775 K STREET, N.W.

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

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

Transaction ID: SA11C.4333

Amount of Each Receipt this Period

5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
VIACOM INTERNATIONAL INC. POLITICAL ACTION COMMITTEE

Mailing Address 1501 M STREET, NW  
SUITE 1100

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt

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

Transaction ID: SA11C.4392

Amount of Each Receipt this Period

1500.00

Contribution

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

11500.00

**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 9 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
BRINGING LEADERSHIP BACK PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT		Date of Receipt
	Mailing Address 702 S.W. 8th Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bentonville	AR	72716
	FEC ID number of contributing federal political committee.		<input type="text" value="C00093054"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA11C.4390 Amount of Each Receipt this Period <input type="text" value="2500.00"/> Contribution	
Aggregate Year-to-Date ▼		<input type="text" value="2500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="14000.00"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 16

<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)  
BRINGING LEADERSHIP BACK PAC

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4331 Date of Disbursement
	Mailing Address 1501 Pennsylvania Ave., N.W.	<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge	<input type="text" value="29.95"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4330 Date of Disbursement
	Mailing Address 1501 Pennsylvania Ave., N.W.	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge	<input type="text" value="29.95"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4403 Date of Disbursement
	Mailing Address 1501 Pennsylvania Ave., N.W.	<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge	<input type="text" value="29.95"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

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

**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)  
BRINGING LEADERSHIP BACK PAC

A.	Full Name (Last, First, Middle Initial) Erika Barrera Mailing Address PO Box 40964 City Arlington State VA Zip Code 22204 Purpose of Disbursement PAC Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4387 Date of Disbursement 11 / 05 / 2009	Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Bobby Van's Mailing Address 809 15th St NW City Washington State DC Zip Code 20005 Purpose of Disbursement PAC Fundraising Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4405 Date of Disbursement 12 / 09 / 2009	Amount of Each Disbursement this Period 1705.28
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address Arlington South Station City Arlington State VA Zip Code 22204 Purpose of Disbursement PAC PO Box Rental Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4404 Date of Disbursement 12 / 23 / 2009	Amount of Each Disbursement this Period 100.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4305.28</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>4395.13</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 16

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

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NAME OF COMMITTEE (In Full)  
BRINGING LEADERSHIP BACK PAC

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BOSWELL FOR CONGRESS</b> <hr/> Mailing Address PO Box 6220 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement Contribution Candidate Name <b>LEONARD L. BOSWELL</b> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4395 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>BOYD FOR CONGRESS</b> <hr/> Mailing Address P.O. Box 15703 P.O. Box 15703 <hr/> City Tallahassee State FL Zip Code 32317 <hr/> Purpose of Disbursement Contribution Candidate Name <b>F. ALLEN JR. BOYD</b> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4348 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>CAROL SHEA-PORTER FOR CONGRESS</b> <hr/> Mailing Address PO Box 453 <hr/> City Rochester State NH Zip Code 03866 <hr/> Purpose of Disbursement Contribution Candidate Name <b>CAROL SHEA-PORTER</b> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4385 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 16

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

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NAME OF COMMITTEE (In Full)  
BRINGING LEADERSHIP BACK PAC

A.	Full Name (Last, First, Middle Initial) CIRO RODRIGUEZ FOR CONGRESS	Transaction ID: SB23.4375 Date of Disbursement																			
	Mailing Address PO Box 14528	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	6	/	2	0	0	9												
	City San Antonio State TX Zip Code 78214	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name CIRO D. RODRIGUEZ	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FRIENDS OF DAN MAFFEI	Transaction ID: SB23.4355 Date of Disbursement																			
	Mailing Address PO Box 74	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	6	/	2	0	0	9												
	City Syracuse State NY Zip Code 13214	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name DANIEL BENJAMIN MR. MAFFEI	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) JIM HIMES FOR CONGRESS	Transaction ID: SB23.4353 Date of Disbursement																			
	Mailing Address 857 Post Road, #312	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	6	/	2	0	0	9												
	City Fairfield State CT Zip Code 06824	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution 1000.	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name JIM HIMES	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BRINGING LEADERSHIP BACK PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) KENDRICK MEEK FOR FLORIDA</p> <p>Mailing Address 111 NW 183RD STREET SUITE 325</p> <p>City MIAMI State FL Zip Code 33169</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name KENDRICK B MEEK</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4343</p> <p>Date of Disbursement 12 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) KILROY FOR CONGRESS</p> <p>Mailing Address 550 East Walnut Street Ste 305</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name MARY JO KILROY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4394</p> <p>Date of Disbursement 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) KISSELL FOR CONGRESS</p> <p>Mailing Address P.O. Box 1530</p> <p>City Biscoe State NC Zip Code 27209</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name LARRY W. KISSELL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4354</p> <p>Date of Disbursement 12 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
BRINGING LEADERSHIP BACK PAC

**A.** Full Name (Last, First, Middle Initial)  
KURT SCHRADER FOR CONGRESS

Mailing Address 2236 SOUTHEAST 10TH AVENUE  
Suite 240

City PORTLAND State OR Zip Code 97214

Purpose of Disbursement  
Contribution

Candidate Name  
KURT SCHRADER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

Transaction ID: SB23.4376

Date of Disbursement

12 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
MASSA FOR CONGRESS

Mailing Address 60 East Market Street  
Suite 244

City Corning State NY Zip Code 14830

Purpose of Disbursement  
Contribution

Candidate Name  
ERIC JJ MASSA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 29

Transaction ID: SB23.4361

Date of Disbursement

12 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 6520 Village Parkway  
Second Floor

City Dublin State CA Zip Code 94568

Purpose of Disbursement  
Contribution

Candidate Name  
JERRY MCNERNEY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 11

Transaction ID: SB23.4366

Date of Disbursement

12 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 16

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

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NAME OF COMMITTEE (In Full)  
BRINGING LEADERSHIP BACK PAC

A.	Full Name (Last, First, Middle Initial) MINNICK FOR CONGRESS	Transaction ID: SB23.4371
	Mailing Address P O BOX 306	Date of Disbursement 12 / 16 / 2009
	City Boise State ID Zip Code 83701	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name WALTER CLIFFORD MINNICK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
B.	Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS COMMITTEE	Transaction ID: SB23.4386
	Mailing Address 726 Sixteenth Street NE	Date of Disbursement 12 / 16 / 2009
	City Massillon State OH Zip Code 44646	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name ZACHARY T SPACE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

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

2000.00

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

14000.00