

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Haley's PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		116494.16
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	525944.81									
(c) Total Receipts (from Line 19)	25135.75	799435.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	551080.56	915929.25								
7. Total Disbursements (from Line 31)	95466.00	460314.69								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	455614.56	455614.56								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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**

Write or Type Committee Name
Haley's PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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)	13000.00	646125.00
(ii) Unitemized	6135.75	53810.09
(iii) TOTAL (add Lines 11(a)(i) and (ii)	19135.75	699935.09
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	6000.00	99500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	25135.75	799435.09
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))	25135.75	799435.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25135.75	799435.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	46790.00	292638.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	46790.00	292638.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44500.00	159000.00
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	4176.00	4676.00
(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))	4176.00	4676.00
29. Other Disbursements.....	0.00	4000.00
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))..	95466.00	460314.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95466.00	460314.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	25135.75	799435.09
34. Total Contribution Refunds (from Line 28(d))	4176.00	4676.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20959.75	794759.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46790.00	292638.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	46790.00	292638.69

**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 / 24
	<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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) MR. ROBERT C. COWEN	Date of Receipt MM / DD / YYYY 10 / 07 / 2010
	Mailing Address 2756 INDIAN SPRINGS ROAD	Transaction ID: SA11.17558
	City MARIANNA State FL Zip Code 32446-6889	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

B.	Full Name (Last, First, Middle Initial) MR. JAMES C. ECKERT	Date of Receipt MM / DD / YYYY 10 / 05 / 2010
	Mailing Address P.O. BOX 861	Transaction ID: SA11.17461
	City BRANDON State MS Zip Code 39043-0861	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer ECKERT FARMS Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. ROBERT W. GARTHWAIT, SR.	Date of Receipt MM / DD / YYYY 10 / 07 / 2010
	Mailing Address P.O. BOX 1367	Transaction ID: SA11.17547
	City WATERBURY State CT Zip Code 06721-1367	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer DEL MANUFACTURING CO. Occupation CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	1300.00
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 7 / 24
(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)
Haley's PAC

<p>A. Full Name (Last, First, Middle Initial) MR. ROBERT C. GRENFELL</p> <p>Mailing Address 313 NORTHBAY DRIVE</p> <p>City State Zip Code MADISON MS 39110-9174</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation ENTERGY MS VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2010</p> <p>Transaction ID: SA11.17762</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p>
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<p>B. Full Name (Last, First, Middle Initial) MR. JAMES A. HARRELL</p> <p>Mailing Address 137 LAKEVIEW DR</p> <p>City State Zip Code CANTON MS 39046-4916</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MCH TRANSPORTATION CO. CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2010</p> <p>Transaction ID: SA11.17450</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>CONTRIBUTION</p>
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<p>C. Full Name (Last, First, Middle Initial) DR. JAMES C. HAYS</p> <p>Mailing Address 5 LAUREL COVE</p> <p>City State Zip Code JACKSON MS 39211-6463</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation JACKSON HEART CLINIC, P.A. CARDIOLOGY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2010</p> <p>Transaction ID: SA11.17460</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p>
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SUBTOTAL of Receipts This Page (optional)	3500.00
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 8 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Haley's PAC

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS E. LEVANWAY

Mailing Address 15 HIGHLAND MEADOWS DRIVE

City JACKSON State MS Zip Code 39211-5950

FEC ID number of contributing federal political committee. C

Name of Employer WISE CARTER CHILD & CARAWAY
Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y
10 / 07 / 2010

Transaction ID: SA11.17499

Amount of Each Receipt this Period 600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GLENN L. MCCULLOUGH, JR.

Mailing Address 2012 NANCY DR

City TUPELO State MS Zip Code 38804-1030

FEC ID number of contributing federal political committee. C

Name of Employer ARDILLO MCCULLOUGH AND TAGGART
Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 07 / 2010

Transaction ID: SA11.17500

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWIN C. SANDHAM

Mailing Address 1964 SW SAINT ANDREWS DRIVE

City PALM CITY State FL Zip Code 34990-2210

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 / D D / Y Y Y Y
10 / 07 / 2010

Transaction ID: SA11.17564

Amount of Each Receipt this Period 200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 1800.00

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 / 24
(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)
Haley's PAC

A. Full Name (Last, First, Middle Initial)
MR. GARY J. TAYLOR

Mailing Address 625 SAINT CHARLES AVE APT 8A

City State Zip Code
NEW ORLEANS LA 70130-3419

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

Name of Employer Occupation
ENERGY EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2010

Transaction ID: SA11.17763

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LUEL TURNER

Mailing Address 1404 BEAR CREEK ROAD

City State Zip Code
ADEL GA 31620-1308

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2010

Transaction ID: SA11.17518

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LUEL TURNER

Mailing Address 1404 BEAR CREEK ROAD

City State Zip Code
ADEL GA 31620-1308

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2010

Transaction ID: SA11.17610

Amount of Each Receipt this Period
300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 10 / 24	
	(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

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NAME OF COMMITTEE (In Full)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) MS. KAY HARRIGAN WOODS		Date of Receipt
	Mailing Address 3570 JACKSON ST		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN FRANCISCO	CA	94118-1808
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.17451
Name of Employer SCOTCH PLYWOOD CO.		Occupation OWNER/CHAIRMAN OF THE BOARD	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="5000.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 24
	(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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
GREGG HARPER FOR CONGRESS

Mailing Address P.O. BOX 54344

City State Zip Code
PEARL MS 39288-4344

FEC ID number of contributing federal political committee. **C** C00441295

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2010

Transaction ID: SA11.17459

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ENPAC MISSISSIPPI

Mailing Address P.O. BOX 1640

City State Zip Code
JACKSON MS 39215-1640

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2010

Transaction ID: SA11.17497

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	6000.00
TOTAL This Period (last page this line number only)	▶	6000.00

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)
Haley's PAC

<p>A. Full Name (Last, First, Middle Initial) DOLLARHIDE FILM, INC.</p> <p>Mailing Address 764 LAKE CAVALIER ROAD</p> <p>City MADISON State MS Zip Code 39110</p> <p>Purpose of Disbursement PAC VIDEO PRODUCTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.2 Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 8713.00</p>
<p>B. Full Name (Last, First, Middle Initial) DOLLARHIDE FILM, INC.</p> <p>Mailing Address 764 LAKE CAVALIER ROAD</p> <p>City MADISON State MS Zip Code 39110</p> <p>Purpose of Disbursement PAC VIDEO PRODUCTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.29 Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 6675.00</p>
<p>C. Full Name (Last, First, Middle Initial) EMOTIVE, LLC</p> <p>Mailing Address 2800 SHIRLINGTON RD, STE 901</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement PAC WEBSITE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.35 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1132.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

16520.00

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 14 / 24

<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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) MISSISSIPPI MUSEUM OF ART	Transaction ID: SB.4 Date of Disbursement 10 / 01 / 2010
	Mailing Address 380 SOUTH LAMAR STREET	Amount of Each Disbursement this Period 1464.00
	City JACKSON State MS Zip Code 39201	
	Purpose of Disbursement PAC EVENT EXPENSE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PETAL PUSHERS	Transaction ID: SB.3 Date of Disbursement 10 / 01 / 2010
	Mailing Address PO BOX 1605	Amount of Each Disbursement this Period 535.00
	City MADISON State MS Zip Code 39130	
	Purpose of Disbursement PAC EVENT FLOWERS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB.30 Date of Disbursement 10 / 08 / 2010
	Mailing Address 401 E. SOUTH ST.	Amount of Each Disbursement this Period 3000.00
	City JACKSON State MS Zip Code 39201-9820	
	Purpose of Disbursement POSTAGE & DELIVERY	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4999.00
TOTAL This Period (last page this line number only)	46790.00

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 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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
BUCK FOR COLORADO

Mailing Address PO BOX 101465

City DENVER State CO Zip Code 80250

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
KENNETH BUCK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District: 00

Transaction ID: SB.10
Date of Disbursement

10 / 07 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
COBURN FOR SENATE 2010

Mailing Address PO BOX 977

City MUSKOGEE State OK Zip Code 74402

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
TOM COBURN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OK District: 00

Transaction ID: SB.22
Date of Disbursement

10 / 07 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
DAVID SCHWEIKERT FOR CONGRESS

Mailing Address 4110 N. GOLDWATER BLVD.

City SCOTTSDALE State AZ Zip Code 85251

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Candidate Name
DAVID SCHWEIKERT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AZ District: 05

Transaction ID: SB.33
Date of Disbursement

10 / 12 / 2010

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)

<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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CHRISTINE O'DONNELL	Transaction ID: SB.12
	Mailing Address PO BOX 3987	Date of Disbursement 10 / 07 / 2010
	City WILMINGTON State DE Zip Code 19807	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/ Type
	Candidate Name CHRISTINE O'DONNELL	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF SHARRON ANGLE	Transaction ID: SB.18
	Mailing Address PO BOX 33058	Date of Disbursement 10 / 07 / 2010
	City RENO State NV Zip Code 89533	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/ Type
	Candidate Name SHARRON ANGLE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF KELLY AYOTTE	Transaction ID: SB.19
	Mailing Address 101 CHARLES STREET	Date of Disbursement 10 / 07 / 2010
	City MANCHESTER State NH Zip Code 03101	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/ Type
	Candidate Name KELLY AYOTTE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN THUNE	Transaction ID: SB.25 Date of Disbursement
	Mailing Address PO BOX 841	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City SIOUX FALLS State SD Zip Code 57101	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	<input type="text" value="1000.00"/>
	Candidate Name JOHN THUNE	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF MIKE LEE, INC.	Transaction ID: SB.26 Date of Disbursement
	Mailing Address 38 EAST REDPINE DRIVE	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City ALPINE State UT Zip Code 84004	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	<input type="text" value="1000.00"/>
	Candidate Name MIKE LEE	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN MCCAIN	Transaction ID: SB.8 Date of Disbursement
	Mailing Address 1702 EAST HIGHLAND AVENUE, #101	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City PHOENIX State AZ Zip Code 85016	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	<input type="text" value="1000.00"/>
	Candidate Name JOHN MCCAIN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) JIM DEMINT SENATE COMMITTEE, INC.	Transaction ID: SB.24 Date of Disbursement
	Mailing Address PO BOX 12425	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City COLUMBIA State SC Zip Code 29211	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	<input type="text" value="1000.00"/>
	Candidate Name JIM DEMINT	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOE MILLER FOR US SENATE	Transaction ID: SB.7 Date of Disbursement
	Mailing Address PO BOX 72838	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City FAIRBANKS State AK Zip Code 99707	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	<input type="text" value="1000.00"/>
	Candidate Name JOE MILLER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOHN BOOZMAN FOR ARKANSAS	Transaction ID: SB.9 Date of Disbursement
	Mailing Address 11300 FINANCIAL CENTRE PARKWAY	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City LITTLE ROCK State AR Zip Code 72211	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	<input type="text" value="2500.00"/>
	Candidate Name JOHN BOOZMAN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) KELLY FOR CONGRESS	Transaction ID: SB.32
	Mailing Address PO BOX 89520	Date of Disbursement 10 / 12 / 2010
	City TUCSON State AZ Zip Code 85752	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/ Type
	Candidate Name JESSE KELLY	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: AZ District: 08	

B.	Full Name (Last, First, Middle Initial) KIRK FOR SENATE	Transaction ID: SB.15
	Mailing Address PO BOX 8	Date of Disbursement 10 / 07 / 2010
	City WINNETKA State IL Zip Code 60093	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/ Type
	Candidate Name MARK KIRK	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: IL District: 00	

C.	Full Name (Last, First, Middle Initial) LINDA MCMAHON FOR SENATE 2010	Transaction ID: SB.11
	Mailing Address PO BOX 271386	Date of Disbursement 10 / 07 / 2010
	City WEST HARTFORD State CT Zip Code 06127	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/ Type
	Candidate Name LINDA MCMAHON	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CT District: 00	

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) MARCO RUBIO FOR US SENATE	Transaction ID: SB.13 Date of Disbursement 10 / 07 / 2010
	Mailing Address 2030 SOUTH DOUGLAS ROAD	Amount of Each Disbursement this Period 5000.00
	City CORAL GABLES State FL Zip Code 33134	
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/Type
	Candidate Name MARCO RUBIO	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MIKE CRAPO FOR US SENATE	Transaction ID: SB.14 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO BOX 1948	Amount of Each Disbursement this Period 1000.00
	City BOISE State ID Zip Code 83701	
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/Type
	Candidate Name MIKE CRAPO	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MORAN FOR KANSAS	Transaction ID: SB.17 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO BOX 1151	Amount of Each Disbursement this Period 1000.00
	City HAYS State KS Zip Code 67601	
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/Type
	Candidate Name JERRY MORGAN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) PAUL GOSAR FOR CONGRESS	Transaction ID: SB.31 Date of Disbursement 10 / 12 / 2010	
	Mailing Address 2222E. CEDAR AVENUE		
	City FLAGSTAFF State AZ Zip Code 86004	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS		
	Candidate Name PAUL GOSAR	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: AZ District: 01	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) PEOPLE FOR DIOGUARDI	Transaction ID: SB.20 Date of Disbursement 10 / 07 / 2010	
	Mailing Address 420 SOUTH RIVERSIDE AVENUE		
	City CROTON-ON-HUDSON State NY Zip Code 10520	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS		
	Candidate Name JOSEPH DIOGUARDI	Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: NY District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) ROSSI FOR SENATE	Transaction ID: SB.27 Date of Disbursement 10 / 07 / 2010	
	Mailing Address PO BOX 50713		
	City BELLEVUE State WA Zip Code 98015	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement POLITICAL CONTRIBUTIONS		
	Candidate Name DINO ROSSI	Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: WA District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)
Haley's PAC

A.	Full Name (Last, First, Middle Initial) SHELBY FOR US SENATE	Transaction ID: SB.28 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO BOX 1091	Amount of Each Disbursement this Period 1000.00
	City TUSCALOOSA State AL Zip Code 35403	
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/Type
	Candidate Name RICHARD SHELBY	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THE GRASSLEY COMMITTEE, INC.	Transaction ID: SB.16 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO BOX 1000	Amount of Each Disbursement this Period 1000.00
	City DES MOINES State IA Zip Code 50304	
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/Type
	Candidate Name CHARLES GRASSLEY	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THE RICHARD BURR COMMITTEE	Transaction ID: SB.21 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO BOX 5928	Amount of Each Disbursement this Period 2500.00
	City WINSTON-SALEM State NC Zip Code 27113	
	Purpose of Disbursement POLITICAL CONTRIBUTIONS	Category/Type
	Candidate Name RICHARD BURR	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
TOOMEY FOR SENATE

Transaction ID: SB.23

Date of Disbursement

Mailing Address 3440 HAMILTON BLVD.

^M 1	^M 0	/	^D 0	^D 7	/	^Y 2	^Y 0	^Y 1	^Y 0
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City ALLENTOWN State PA Zip Code 18103

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
POLITICAL CONTRIBUTIONS

Category/
Type

Candidate Name
PAT TOOMEY

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 00

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

44500.00

**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 24 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
Haley's PAC

A.

Full Name (Last, First, Middle Initial)
DR. NATHAN WASSERSTRUM

Mailing Address 142 PAMELLIA

City State Zip Code
BELLAIRE TX 77401

Purpose of Disbursement
REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Transaction ID: SB.1

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4176.00

SUBTOTAL of Disbursements This Page (optional)

4176.00

TOTAL This Period (last page this line number only)

4176.00