11/22/2010 09:52

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Hermanator PAC; The PO Box 1804 ADDRESS (number and street) Check if different than previously Orlando FL 32802 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE A CITY A IS THIS NEW **AMENDED** C00483115 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day Х (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the 11 02 2010 Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 10 0 1 2010 10 13 2010 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Scott Toomey Type or Print Name of Treasurer Electronically Filed by Scott Toomey 10 13 2010 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/18

Write or Type Committee Name Hermanator PAC: The

FEC Form 3X (Rev. 02/2003)

D 1.0 13 2010 1 0 0 1 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 0.00 January 1 (b) Cash on Hand at 20346.84 Begining of Reporting Period 11271.00 148507.87 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 31617.84 148507.87 6(a) and 6(c) for Column B) 129482.00 12591.97 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 19025.87 19025.87 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on

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

Schedule C and/or Schedule D)

For further information contact:

0.00

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) 3 / 18

Write or Type Committee Name Hermanator PAC; The

Report Covering the Period:

From:

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Y Y W Y 2010

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I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	3300.00	105100.00
(ii) Unitemized	7971.00	43407.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11271.00	148507.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	11271.00	148507.87
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
B. 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
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11271.00	148507.87
Total Federal Receipts (subtract Line 18(c) from Line 19)	11271.00	148507.87

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 18

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		Į.
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
22.	Transfers to Affiliated/Other Party		
23.	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	2000.00
4.	Independent Expenditure	0.00	0.00
5	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Laura Mada	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(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	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	12591.97	127482.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	12591.97	129482.00
32.	Total Federal Disbursements		
•	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	12591.97	129482.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 18

	tributions/Operating enditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	s (other than loans)	11271.00	148507.87
4. Total Contribution (from Line 28(d))	Refunds	0.00	0.00
85. Net Contributions (subtract Line 34	(other than loans) from Line 33)	11271.00	148507.87
•	erating Expenditures and Line 21(b))	0.00	0.00
37. Offsets to Operat (from Line 15, pag	ing Expenditures	0.00	0.00
88. Net Operating Exp	penditures	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 18 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Hermanator PAC; The	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Cliff L Beveridge		Date of Receipt
Mailing Address 1216 Gotier Trace Rd.	•	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.8273
<u>Paige</u>	TX 78659	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Engineer	Occupation Ultra-ATS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Rush S Clark	<u> </u>	Date of Receipt
Mailing Address 7725 Bamby Rd 7725 Bamby Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.8365
Cumming	GA 30041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer None	Occupation Retired	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) David E Hall	<u> </u>	Date of Receipt
Mailing Address 5830 Overhill Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Prairie Village</u>	State Zip Code KS 66208	Transaction ID: SA11AI.8172 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional)		2700.00

TOTAL This Period (last page this line number only)

A.

В.

SCHEDULE A (FEC Form 3X)

PAGE 7/18 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) Hermanator PAC; The Full Name (Last, First, Middle Initial) Date of Receipt James Stroud Mailing Address 2102 Country Park Drive 10 8 0 2010 City State Zip Code Transaction ID: SA11AI.8203 Smyrna GA 30080 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer X1 Solutions Occupation Consultant/Business Owner Receipt For: Aggregate Year-to-Date General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) Robert Zuleeg Date of Receipt Mailing Address 1455 Lake Berge Road 01 2010 City Transaction ID: SA11AI.8165 State Zip Code Orlando FL 32825 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer None Occupation Retired Receipt For: Aggregate Year-to-Date ▼

300.00

		600.00
SUBTOTAL of Receipts This Page (optional)	>	000.00
TOTAL This Period (last page this line number only)	<u> </u>	3300.00

Primary

Other (specify)

General

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (check c			LINE NUMBER: PAGE 8/1				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	23 28b	24		26 30
Any Information copied from such Reports and State or for commercial purposes, other than using the nan								
NAME OF COMMITTEE (In Full)	le and address of any politica	COITIII	11166 10 8	Olicit Corti	ibutions n	OIII SUC	ii committee	
Hermanator PAC; The								
Full Name (Last, First, Middle Initial) Cafe Pasta					action ID of Disburs	ement		
Mailing Address 305 State Street				1 ^M 0	M / D	7 7	^Y ^Y 201	0 ^Y
City	State Zip Code			Amou	nt of Each	n Disbur	rsement this	Period
Greensboro	NC 27408				•	•	750.5	7
Purpose of Disbursement Catering		0	03				700.0	,
Candidate Name		Cate	egory/ /pe					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)				Tropo	action ID	· CD2	00.9650	
Campaigner by Protus					of Disburs		19.0009	
Mailing Address 2379 Holyy Lane, Suite Ottwa Ontario	210			1 ^M 0	M / D	1 0	y žo j	0 ^Y
City	State Zip Code			Amou	nt of Each	n Disbur	rsement this	Period
Canada K1V7P2	ZZ						120.0	n
Purpose of Disbursement Website/Email Software		0	01	L .			120.0	
Candidate Name		Cate	egory/ /pe					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)	•						
Full Name (Last, First, Middle Initial) City Cab					action ID		29.8685	
Mailing Address 324 West Gore Street				1 ^M 0	M / D) 1 /	y žo j	0 ^Y
City	State Zip Code			Amou	nt of Each	n Disbur	rsement this	Period
Orlando	FL 32806			-	•	•	36.1	5
Purpose of Disbursement Travel		0	02				00.11	
Candidate Name		Cate	egory/ /pe					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)							906.7	2
TOTAL This Period (last page this line number only	·)		•					
E6AN026	,			FE/	Schedu	ile R / E	Form 3X) (Re	vieed o

IT	CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)		NUMBER: PAGE 9/18
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	y one) 22
	y Information copied from such Reports and Stat for commercial purposes, other than using the na				
	NAME OF COMMITTEE (In Full) Hermanator PAC; The		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
<u>/</u>	Full Name (Last, First, Middle Initial) City Cab				Transaction ID: SB29.8673 Date of Disbursement
	Mailing Address 324 West Gore Street				$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&0&M\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D&D&D\\0&3\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Q&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix} $
	City Orlando	State FL	Zip Code 32806		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name			002 Category/	36.80
	Office Sought: House Disbut Senate President State: District:	sement For: Primary Other (sp	General ecify) ▼	Туре	
	Full Name (Last, First, Middle Initial) City Cab				Transaction ID: SB29.8669 Date of Disbursement
	Mailing Address 324 West Gore Street				10
	City Orlando	State FL	Zip Code 32806		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name			002 Category/	45.85
	Office Sought: House Disbut Senate President	sement For: Primary Other (sp	General	Туре	
	State: District:	Other (op	y /, \		
		Other (op			Transaction ID: SB29.8663 Date of Disbursement
	State: District: Full Name (Last, First, Middle Initial)	Cirior (op-			
	State: District: Full Name (Last, First, Middle Initial) City Cab	State FL	Zip Code 32806		Date of Disbursement M M / D D D / Y Y Y O Y O Y Amount of Each Disbursement this Period
	State: District: Full Name (Last, First, Middle Initial) City Cab Mailing Address 324 West Gore Street City Orlando Purpose of Disbursement Travel	State	Zip Code	002	Date of Disbursement
	State: District: Full Name (Last, First, Middle Initial) City Cab Mailing Address 324 West Gore Street City Orlando Purpose of Disbursement Travel Candidate Name	State FL	Zip Code	002 Category/ Type	Date of Disbursement M M M / D D D / Y Y Y O Y O Y Amount of Each Disbursement this Period
	State: District: Full Name (Last, First, Middle Initial) City Cab Mailing Address 324 West Gore Street City Orlando Purpose of Disbursement Travel Candidate Name	State	Zip Code 32806	Category/	Date of Disbursement M M M / D D D / Y Y Y O Y O Y Amount of Each Disbursement this Period

S	CHEDULE B (FEC Form 3X)	Use separate sched	ule(s)	_	E NUMBER:		PAGE 10	/ 18
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary P		(check on 21b 27	22 28a	. Ш	24 25 28c X 29	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
	NAME OF COMMITTEE (In Full) Hermanator PAC; The							
۸.	Full Name (Last, First, Middle Initial) City Cab				Date of D	ion ID: SE	t	
	Mailing Address 324 West Gore Street				10	0 9	y žo i	O Y
	City Orlando	State Zip Code FL 32806			Amount o	f Each Disb	oursement this	
	Purpose of Disbursement Travel Candidate Name			002 Category/			38.	35
	Office Sought: Senate President State: Disburse	ement For: Primary Ger Other (specify)	neral	Туре				
3.	Full Name (Last, First, Middle Initial) Encore Resort					ion ID: SE isbursemen	t	Y
	Mailing Address 3131 Las Vegas Boulevard South					0.5	201	0
	,	State Zip Code NV 89109			Amount o	f Each Disb	oursement thi	s Period
	Purpose of Disbursement Travel & Lodging Candidate Name			002 Category/ Type	<u> </u>		384.	06
	Office Sought: House Senate President State: District:	ement For: Primary Ger Other (specify)	neral	1,750	_			
·.	Full Name (Last, First, Middle Initial) Facebook				Date of D	ion ID: SE	t	
	Mailing Address 156 University Ave				10	13	Ý ŽOÌ	0 1
		State Zip Code CA 94301			Amount o	f Each Disb	oursement this	s Period
	Purpose of Disbursement Advertising & Promotion Candidate Name			004 Category/	<u> </u>		30.	00
	Senate President	ement For: Primary Ger Other (specify)	neral	Туре				
	State: District:						450	4.4
s	UBTOTAL of Disbursements This Page (optional)			······ <u>}</u>			452.	41
т	OTAL This Period (last page this line number only)				L			

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER:		PA	GE -	11 / 1	8
ITEMIZED DISBURSEMENTS	for each category of the	(check only	/ one) T 22 T 2:	з П	24	\Box	25	□ 26
	Detailed Summary Page	27		8b	28c	\square	29	30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)	le and address of any political co	Jillillillee lo so		15 1101113	Sucirio	OHIIIII	lice	
Hermanator PAC; The								
Full Name (Last, First, Middle Initial) Facility Management Company			Transaction Date of Disb			8682		
Mailing Address W232 S6820 Millbrook (Dircle		10	^D 0 1	/ Y	ž o) 1 0	Y
City Big Bend	State Zip Code WI 53103		Amount of E	ach Dis	burse	ment t	his F	Period
Purpose of Disbursement Office Rent		001				1069	9.24	
Candidate Name		Category/ Type						
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)			Tuonosation	. ID. C	POO :	0004		
Facility Management Company			Transaction Date of Disb	_	-	8684		
Mailing Address W232 S6820 Millbrook (Circle		10 /	^D 0 1	/ Y	ž 0) 1 0	Y
City Big Bend	State Zip Code WI 53103		Amount of E	ach Dis	burse			-
Purpose of Disbursement Office Space Deposit		001				178	8.20	
Candidate Name		Category/ Type						
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)			Tuanaaatian	. ID. C	ים מי	0040		
Far Horizons Travel			Transaction Date of Disb	ourseme				_
Mailing Address 5902 Highway 51			10	0 4	/ L	žo) 1 0	Y
City McFarland	State Zip Code WI 53558		Amount of E	ach Dis	burse			
Purpose of Disbursement Airfare & Travel		002				66	1.40	
Candidate Name	L	Category/ Type						
Senate President	ement For: Primary General Other (specify)							
State: District:								
SUBTOTAL of Disbursements This Page (optional)		>				1908	3.84	

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)

		Use separate schedule(s)	FOR (chec	k only				L		12/	10
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		<u>` </u>	b _	22 28a	П	23 28b	2	4	25 29	
	y Information copied from such Reports and States or commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)											<u> </u>
<u>/</u>	Hermanator PAC; The											
	Full Name (Last, First, Middle Initial) Far Horizons Travel						of Di	sburs	: SB: ement			V
	Mailing Address 5902 Highway 51					1 0		1	3 /		žoťo)
	City McFarland	State Zip Code WI 53558				Amou	int of	Each	Disbu		nt this F	-
	Purpose of Disbursement Airfare & Travel Candidate Name		_	002 tegory		L.		•		,	561.10)
	Office Sought: Senate President State: Disburs Senate President	ement For: Primary Genera Other (specify) ▼		Гуре								
	Full Name (Last, First, Middle Initial) Hertz Rent-A-Car					Date			: SB2 ement			Y
	Mailing Address 6325 Bryan Blvd					1 0			9		ž o ž o)
	City Greensboro	State Zip Code NC 27409				Amou	int of	Each	Disbu		nt this F	
	Purpose of Disbursement Rental Car Candidate Name		Ca	002 tegory Γype			•	•			100.00	
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Genera Other (specify) ▼	-1	. 100								
	Full Name (Last, First, Middle Initial) Holiday Inn - Charleston Airport					Date	of Di	sburs	: SB:			
	Mailing Address 5264 International Blvd					1 ^M 0	М	^D C	8	<u> </u>	ž o i c)
	City North Charleston	State Zip Code SC 29418				Amou	int of	Each	Disbu	rseme	nt this F	Period
	Purpose of Disbursement Travel & Lodging Candidate Name		_	002 tegory						4	287.40)
	Office Sought: House Disburs	ement For: Primary General Other (specify) \(\forall		Гуре								
	Side. District.						_					

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one) 22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	and address of any political col	minitee to som	cit contributions from such committee
Hermanator PAC; The			
Full Name (Last, First, Middle Initial) Holiday Inn - Charleston Airport			Transaction ID: SB29.8656 Date of Disbursement
Mailing Address 5264 International Blvd			10 M / D 8 / Y 2 0 1 0 Y
	State Zip Code SC 29418		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Lodging		002	254.90
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Holiday Inn - Charleston Airport			Transaction ID: SB29.8657 Date of Disbursement
Mailing Address 5264 International Blvd			10 M / D B / Y Y Y O Y O Y
	State Zip Code SC 29418		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Lodging Candidate Name		002	134.62
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB29.8658
Holiday Inn - Charleston Airport			Date of Disbursement
Mailing Address 5264 International Blvd			10 M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
North Charleston	State Zip Code SC 29418		Amount of Each Disbursement this Period 123.70
Purpose of Disbursement Travel & Lodging			123.70
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .			513.22
TOTAL This Period (last page this line number only)			

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NE NUMBER: PAGE 14 / 18						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 281	24 28c	25 X 29	26 30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	and address of any political col	THINITIES TO SOIL	Cit Continbutions	TIOTH SUCH	Ommittee				
Hermanator PAC; The									
Full Name (Last, First, Middle Initial) Holiday Inn Express - Greensboro			Transaction Date of Disbu		8649				
Mailing Address 646 South Regional Roa	d		10 /	08	ž 0 1 0	Y			
City Greensboro	State Zip Code NC 27409		Amount of Ea	ch Disburse	ment this F	Period			
Purpose of Disbursement Travel & Lodging		002			270.72				
Candidate Name	C	Category/ Type							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)								
Full Name (Last, First, Middle Initial)				- 0500					
Holiday Inn Express - Greensboro			Transaction Date of Disbu	rsement		Y			
Mailing Address 646 South Regional Roa			1 0	0 8	Ž 0 Ĭ 0				
Greensboro	State Zip Code NC 27409		Amount of Ea	ch Disburse		-			
Purpose of Disbursement Travel & Lodging		002			225.22				
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)								
Full Name (Last, First, Middle Initial) Holiday Inn Express - Greensboro			Transaction Date of Disbu	rsement	8652				
Mailing Address 646 South Regional Roa	d		10 /	08	ž 0 1 0	Y			
City Greensboro	State Zip Code NC 27409		Amount of Ea	ch Disburse					
Purpose of Disbursement Travel & Lodging		002			135.36				
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)								
SUBTOTAL of Disbursements This Page (optional)		▶			631.30				
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC Form 3X)

SCHEDOLL B (I LC I OIIII 5X)	Use separate schedule(s	(check only	NUMBER: PAGE 15 / 18 vone)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28 28a 28b 28c X 29
Any Information copied from such Reports and Stator for commercial purposes, other than using the national statement of the s			
NAME OF COMMITTEE (In Full) Hermanator PAC; The			
Full Name (Last, First, Middle Initial) Holiday Inn Express - Greensboro			Transaction ID: SB29.8653 Date of Disbursement
Mailing Address 646 South Regional R	oad		10 M / 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Greensboro	State Zip Code NC 27409	_	Amount of Each Disbursement this Perio
Purpose of Disbursement Travel & Lodging Candidate Name		002 Category/	112.61
	rsement For: Primary General Other (specify)	Type	
Full Name (Last, First, Middle Initial) Maelstrom Solutions			Transaction ID: SB29.8675 Date of Disbursement
Mailing Address 200 South Executive E Suite 100	Prive		10 M / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brookfield	State Zip Code WI 53005		Amount of Each Disbursement this Perio
Purpose of Disbursement Website & Internet Service		003	50.00
Candidate Name		Category/ Type	
Office Sought: House Disbute Senate President State: District:	rrsement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Maelstrom Solutions			Transaction ID: SB29.8689 Date of Disbursement
Mailing Address 200 South Executive D Suite 100	Orive		10
City Brookfield	State Zip Code WI 53005		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Candidate Name		003 Category/	59.65
	rsement For:	Category/ Type	
State: District:	Primary General Other (specify)		

Any Infor or for cor or for cor or for cor NAM Hern Mailir City Brood Credit Cand Mailir City Brood Credit Cand Mailir City Brood Credit Cand Cand Cand Cand Cand Cand Cand Cand	ormation copied ommercial purportion of COMMI remanator PAC Name (Last, Fielstrom Solution Address obtained and Card Procest additional card Process a	poses, other than using TTEE (In Full) C; The rst, Middle Initial) ions 200 South Execute 100 ement sing House Senate President District: rst, Middle Initial) ions 200 South Execute 100	and Statements may ng the name and add cutive Drive State WI Disbursement For Primary	Zip Code 53005	21b 27 ed by any person f	Transaction ID: SB29.8691 Transaction ID: SB29.8690 Amount of Each Disbursement this Period Transaction ID: SB29.8691
Full N Mael City Brood Credit Cand Office State Full N Mael Mailir City Brood Credit Cand Office State Full N Mael Mailir City Credit Cand	ommercial purpomercial purpomer	poses, other than using TTEE (In Full) C; The rst, Middle Initial) ions 200 South Execute 100 ement sing House Senate President District: rst, Middle Initial) ions 200 South Execute 100	cutive Drive State WI Disbursement For Primary	Zip Code 53005	od by any person fall committee to so	for the purpose of soliciting contributions solicit contributions from such committee Transaction ID: SB29.8690 Date of Disbursement Mo M / Do 7 / Y 2 0 1 0 Y 2 0 1 0 Y 2 1 1 0 Y 2 1 1 0 Y 2 1 1 0 Y 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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City Broo Purpo Credi Cand Office State Full N Mael Mailir City Broo Purpo Credi Cand	pookfield pose of Disburs dit Card Proces indidate Name ce Sought: le: Name (Last, Fi elstrom Solut	Suite 100 ement sing House Senate President District: rst, Middle Initial) ions 200 South Execution	State WI Disbursement For Primary	53005	Category/	Amount of Each Disbursement this Period
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Full N Mael Mailir City Broo Purpo Credi	Name (Last, Fi elstrom Solut	rst, Middle Initial) ions 200 South Exec				Transaction ID: CD00 9601
Mailir City Broo Purpo Credi	elstrom Solut	ions 200 South Exec				Transaction ID: CD00 0001
City Broo Purpo Credi Cand	ling Address					Date of Disbursement
Purpo Credi Cand	Mailing Address 200 South Executive Drive Suite 100				10 12 / 2010	
Credi	okfield		State WI	Zip Code 53005		Amount of Each Disbursement this Period
	pose of Disburs dit Card Proces				003	33.50
Office	ndidate Name				Category/ Type	
Ctoto	ce Sought:	House Senate President District:	Disbursement For Primary Other (s		1762	
State Full N		rst, Middle Initial)				Transaction ID: SB29.8692
Publ	xilo					Date of Disbursement
Mailir	ling Address	400 East Centra	al Blvd			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Orla	ando		State FL	Zip Code 32801		Amount of Each Disbursement this Period
	Purpose of Disbursement Postage Candidate Name			003	293.14	
			Category/			
	ce Sought:	House Senate President	Disbursement For Primary Other (s			
State			i			
SUBTO	te: I	District:				L

	CHEDULE B (FEC FOIII 3X)	Use separate schedule	S) (check	INE NUMBER: PAGE 17 / 18 only one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	211	22 23 24 25 28 28c X 29
	y Information copied from such Reports and Store commercial purposes, other than using the r			
\rangle	NAME OF COMMITTEE (In Full) Hermanator PAC; The			
	Full Name (Last, First, Middle Initial) Sun Trust Bank			Transaction ID: SB29.8688 Date of Disbursement 10 0 4 2 0 1 0
	Mailing Address 4751 New Broad Stre	et		10 04 2010
	City Orlando	State Zip Code FL 32814	_	Amount of Each Disbursement this Perio
	Purpose of Disbursement Bank Fees Candidate Name		001 Category/	6.00
	Office Sought: House Senate President State: Disb	ursement For: Primary General Other (specify)	Type	
	Full Name (Last, First, Middle Initial) Sun Trust Bank			Transaction ID: SB29.8681 Date of Disbursement
	Mailing Address 4751 New Broad Stre	et		10 12 7 2010
	City Orlando	State Zip Code FL 32814		Amount of Each Disbursement this Perio
	Purpose of Disbursement Bank Fees		001	15.00
	Candidate Name		Category/ Type	
	Office Sought: House Disb Senate President State: District:	ursement For: Primary Genera Other (specify)	1	
	Full Name (Last, First, Middle Initial) TriNet Employer Group, Inc.			Transaction ID: SB29.8680 Date of Disbursement
	Mailing Address 1100 San Leandro BI Suite 300	vd		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City San Leandro	State Zip Code CA 94577		Amount of Each Disbursement this Perio
	Purpose of Disbursement Payroll Candidate Name		001 Category/	3554.69
			Type	
	Office Sought: House Disb Senate President State: District:	ursement For: Primary Genera Other (specify) ▼	I	
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule	(S) (check onl	NUMBER: PAGE 18/18
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	21b 27	22 23 24 25 28a 28b 28c X 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Hermanator PAC; The			
Full Name (Last, First, Middle Initial) Two Mile Solutions, LLC			Transaction ID: SB29.8674 Date of Disbursement
Mailing Address PO Box 45542			
City Madison	State Zip Code WI 53744	_	Amount of Each Disbursement this Perio
Purpose of Disbursement Website Design Candidate Name		001 Category/	300.00
	rsement For:	Type	
Senate President	Primary General Other (specify) ▼	al	
State: District: Full Name (Last, First, Middle Initial) UPS			Transaction ID: SB29.8667 Date of Disbursement
Mailing Address 55 Glenlake Parkway,	NE		
City Atlanta	State Zip Code GA 30328		Amount of Each Disbursement this Peric
Purpose of Disbursement Postage & Shipping		001	22.95
Candidate Name	on any and Fam.	Category/ Type	
Senate President	rsement For: Primary General Other (specify)	al	
State: District: Full Name (Last, First, Middle Initial) Washington Political Group			Transaction ID: SB29.5914 Date of Disbursement
Mailing Address 1987 S. Lumpkin St.			10 10 / 2010
City Athens	State Zip Code GA 30605		Amount of Each Disbursement this Perio
Purpose of Disbursement Website & Internet Consultation		004	1500.00
Candidate Name	raamant Ecr	Category/ Type	
Office Sought: House Disbut Senate President	rsement For: Primary General Other (specify)	al	
State: District:			
SUBTOTAL of Disbursements This Page (optional	վ)		1822.95
	lv)	.	11915.98