

# 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  
THOROUGHbred PAC

ADDRESS (number and street) PO BOX 65116  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20035

2. **FEC IDENTIFICATION NUMBER** C00425439  
**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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2011 through 06 30 2011

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 Patricia Doty Bradshaw

Signature of Treasurer Electronically Filed by Patricia Doty Bradshaw Date 07 30 2011

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  
THOROUGHbred PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		91772.72
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	91772.72									
(c) Total Receipts (from Line 19) .....	77500.00	77500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	169272.72	169272.72								
7. Total Disbursements (from Line 31) .....	36339.43	36339.43								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	132933.29	132933.29								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
THOROUGHbred PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	4500.00	4500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4500.00	4500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	73000.00	73000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	77500.00	77500.00
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)) .....	77500.00	77500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	77500.00	77500.00

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.....	22339.43	22339.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	22339.43	22339.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	12000.00
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.....	2000.00	2000.00
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))..	36339.43	36339.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36339.43	36339.43

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) .....	77500.00	77500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	77500.00	77500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22339.43	22339.43
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	22339.43	22339.43

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 32  
(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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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)  
THOROUGHbred PAC

**A.**

Full Name (Last, First, Middle Initial) Jason Bentley		Date of Receipt MM / DD / YYYY 01 / 31 / 2011
Mailing Address 960 Inverness Road		<b>Transaction ID:</b> SA11AI.5071
City Frankfort	State KY	Zip Code 40601
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer McBrayer McGinnis Leslie & Kir	Occupation Attorney	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Stephanie Kyle		Date of Receipt MM / DD / YYYY 01 / 10 / 2011
Mailing Address 333 N Point Center E Ste300B		<b>Transaction ID:</b> SA11AI.5075
City Alpharetta	State GA	Zip Code 30022
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Wells Fargo	Occupation Home Mortgage Consultant	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Tucker Shumack		Date of Receipt MM / DD / YYYY 02 / 09 / 2011
Mailing Address 2346 S. Nash Street		<b>Transaction ID:</b> SA11AI.5077
City Arlington	State VA	Zip Code 22202
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer Capitol Counsel	Occupation Government Affairs Consultant	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 32	
	(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)  
THOROUGHbred PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph Stanko		Date of Receipt		
	Mailing Address 2100 Whiteoaks Drive		M M / D D / Y Y Y Y 06 / 20 / 2011		
	City Alexandria	State VA	Zip Code 22306	<b>Transaction ID:</b> SA11AI.5073	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00		
	Name of Employer Hunton & Williams	Occupation partner	contribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
THOROUGHbred PAC

**A.** Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE. FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

Mailing Address 4301 WILSON BOULEVARD

City State Zip Code  
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. C C00002972

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  
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11C.5079

Amount of Each Receipt this Period  
5000.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
ALLEGHENY ENERGY INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 800 N. 3RD STREET  
SUITE 201

City State Zip Code  
HARRISBURG PA 17102

FEC ID number of contributing federal political committee. C C00335232

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 1 1

Transaction ID: SA11C.5081

Amount of Each Receipt this Period  
2500.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 BEACH STREET

City State Zip Code  
SAN FRANCISCO CA 94109

FEC ID number of contributing federal political committee. C C70003785

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
0 1 / 3 1 / 2 0 1 1

Transaction ID: SA11C.5083

Amount of Each Receipt this Period  
1000.00  
 contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 8500.00

**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 / 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
THOROUGHBRED PAC

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIAN PAC

Mailing Address 2831 Lone Oak Road

City Paducah State KY Zip Code 42003

FEC ID number of contributing federal political committee. **C** C00351197

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 30 / 2011  
**Transaction ID:** SA11C.5085  
 Amount of Each Receipt this Period: 5000.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 Morris Drive Suite 100

City Chesterbrook State PA Zip Code 19355

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 01 / 31 / 2011  
**Transaction ID:** SA11C.5086  
 Amount of Each Receipt this Period: 2500.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street Room 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 28 / 2011  
**Transaction ID:** SA11C.5087  
 Amount of Each Receipt this Period: 5000.00  
 contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12500.00

**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 / 32  
(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)  
THOROUGHbred PAC

**A.** Full Name (Last, First, Middle Initial)  
DOMINION POLITICAL ACTION COMMITTEE

Mailing Address One James River Plaza, 20th Floor  
P.O. BOX 26666

City Richmond State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
02 / 09 / 2011

**Transaction ID:** SA11C.5088

Amount of Each Receipt this Period  
2500.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
DTE ENERGY CO. PAC - FEDERAL

Mailing Address ONE ENERGY PLAZA  
ROOM 1583 WCB

City DETROIT State MI Zip Code 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
02 / 09 / 2011

**Transaction ID:** SA11C.5089

Amount of Each Receipt this Period  
2500.00

contribution

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

Mailing Address 3699 WILSHIRE BLVD., #1290

City LOS ANGELES State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY  
06 / 09 / 2011

**Transaction ID:** SA11C.5091

Amount of Each Receipt this Period  
1500.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

**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 11 / 32  
(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)  
THOROUGHbred PAC

**A.**

Full Name (Last, First, Middle Initial) EDISON INTERNATIONAL PAC		Date of Receipt MM / DD / YYYY 06 / 20 / 2011
Mailing Address 3699 WILSHIRE BLVD., #1290		Transaction ID: SA11C.5093
City LOS ANGELES	State CA	Zip Code 90010
FEC ID number of contributing federal political committee. <b>C</b> C00019653		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

**B.**

Full Name (Last, First, Middle Initial) ENSIGN-BICKFORD INDUSTRIES INC POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 06 / 09 / 2011
Mailing Address 883 HOPMEADOW STREET		Transaction ID: SA11C.5121
City SIMSBURY	State CT	Zip Code 06070
FEC ID number of contributing federal political committee. <b>C</b> C00261180		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) FEDERAL EXPRESS POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 02 / 17 / 2011
Mailing Address 942 South Shady Grove Road		Transaction ID: SA11C.5098
City Memphis	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. <b>C</b> C00068692		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 32  
(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)  
THOROUGHbred PAC

**A.** Full Name (Last, First, Middle Initial)  
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Date of Receipt  
MM / DD / YYYY  
04 / 05 / 2011

Mailing Address 101 Constitution Ave. NW  
Suite 500 West

Transaction ID: SA11C.5099

City Washington State DC Zip Code 20001

Amount of Each Receipt this Period  
2000.00

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
MERCK & CO. INC. EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2011

Mailing Address 601 Pennsylvania Ave. NW  
North Building Suite 1200

Transaction ID: SA11C.5100

City Washington State DC Zip Code 20004

Amount of Each Receipt this Period  
2500.00

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2011

Mailing Address 1600 DUKE STREET

Transaction ID: SA11C.5101

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Receipt this Period  
5000.00

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9500.00**

**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 13 / 32  
(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)  
THOROUGHbred PAC

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTAC)

Mailing Address 25 Massachusetts Avenue, NW #100

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt (MM/DD/YYYY) 01/31/2011  
Transaction ID: SA11C.5103  
Amount of Each Receipt this Period 2500.00  
contribution

**B.** Full Name (Last, First, Middle Initial)  
NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1776 I STREET NW 4TH FLR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt (MM/DD/YYYY) 04/06/2011  
Transaction ID: SA11C.5104  
Amount of Each Receipt this Period 5000.00  
contribution

**C.** Full Name (Last, First, Middle Initial)  
POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 PENNSYLVANIA AVENUE N W

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt (MM/DD/YYYY) 02/17/2011  
Transaction ID: SA11C.5094  
Amount of Each Receipt this Period 2500.00  
contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10000.00

**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 14 / 32

(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)  
THOROUGHbred PAC

**A.**

Full Name (Last, First, Middle Initial)  
PPL PEOPLE FOR GOOD GOVERNMENT

Mailing Address TWO NORTH NINTH STREET  
GENTW2

City State Zip Code  
ALLENTOWN PA 18101

FEC ID number of contributing federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 1 1

Transaction ID: SA11C.5106

Amount of Each Receipt this Period

2500.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
PRINTING INDUSTRIES OF AMERICA

Mailing Address 601 13TH ST NW SUITE 350 SOUTH

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00018028

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

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

Transaction ID: SA11C.5108

Amount of Each Receipt this Period

2500.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
PROGRESS ENERGY EMPLOYEES' FEDERAL PAC

Mailing Address PO BOX 1510

City State Zip Code  
RALEIGH NC 27602

FEC ID number of contributing federal political committee. **C** C00091884

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

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

Transaction ID: SA11C.5110

Amount of Each Receipt this Period

2500.00

contribution

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

7500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 32  
(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)  
THOROUGHbred PAC

**A.** Full Name (Last, First, Middle Initial)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Mailing Address 11495 Sunset Hills Road  
Suite 215

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 04 / 05 / 2011  
**Transaction ID:** SA11C.5113  
Amount of Each Receipt this Period: 2000.00  
contribution

**B.** Full Name (Last, First, Middle Initial)  
SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 241 RALPH MCGILL BLVD NE BIN 10111

City ATLANTA State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 02 / 09 / 2011  
**Transaction ID:** SA11C.5114  
Amount of Each Receipt this Period: 2500.00  
contribution

**C.** Full Name (Last, First, Middle Initial)  
TECO ENERGY INC EMPLOYEES' PAC

Mailing Address 702 N FRANKLIN STREET

City TAMPA State FL Zip Code 33602

FEC ID number of contributing federal political committee. **C** C00161422

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 02 / 17 / 2011  
**Transaction ID:** SA11C.5116  
Amount of Each Receipt this Period: 2500.00  
contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**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 16 / 32  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
THOROUGHbred PAC

A.

Full Name (Last, First, Middle Initial)  
THE SHAW GROUP INC. POLITICAL ACTION COMMITTEE

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Mailing Address 1050 K STREET, NW  
SUITE 620

Transaction ID: SA11C.5118

City State Zip Code  
WASHINGTON DC 20001

Amount of Each Receipt this Period

2500.00

FEC ID number of contributing federal political committee.  
**C** C00104885

Name of Employer Occupation

contribution

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	73000.00

**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)  
THOROUGHbred PAC

A.	Full Name (Last, First, Middle Initial) Patricia Doty Bradshaw	Transaction ID: SB21B.4990 Date of Disbursement
	Mailing Address 61 Pinehurst Street	<input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City Memphis State TN Zip Code 38117	Amount of Each Disbursement this Period
	Purpose of Disbursement bookkeeping and PAC maintenance Candidate Name	<input type="text" value="500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Patricia Doty Bradshaw	Transaction ID: SB21B.4991 Date of Disbursement
	Mailing Address 61 Pinehurst Street	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Memphis State TN Zip Code 38117	Amount of Each Disbursement this Period
	Purpose of Disbursement bookkeeping and PAC maintenance Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Komfort Koaches	Transaction ID: SB21B.4988 Date of Disbursement
	Mailing Address 1021 East 4th Street	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Owensboro State KY Zip Code 42303-3324	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC fundraising expense - bus rental Candidate Name	<input type="text" value="1038.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2538.00"/>
<b>TOTAL</b> 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)

PAGE 18 / 32

<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)  
THOROUGHBRED PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Platinum Plus for Business/Business Card Mailing Address PO Box 15469 City Wilmington State DE Zip Code 19850 Purpose of Disbursement credit card: see memo 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) ▼	<b>Transaction ID:</b> SB21B.4984 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1599.62	

<b>B.</b> Full Name (Last, First, Middle Initial) Westin Hotel Mailing Address City New York State NY Zip Code Purpose of Disbursement travel expense - food 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) ▼	<b>Transaction ID:</b> SB21B.4984.0 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 33.83  <b>[MEMO ITEM]</b>	

<b>C.</b> Full Name (Last, First, Middle Initial) Amtrak Mailing Address multiple locations City State Zip Code Purpose of Disbursement travel expense - transportation 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) ▼	<b>Transaction ID:</b> SB21B.4984.1 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 46.00  <b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1599.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 19 / 32

<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)  
THOROUGHbred PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Union Station Mailing Address City Washington State DC Zip Code Purpose of Disbursement travel expense - parking 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.4984.2 Date of Disbursement 01 / 29 / 2011
	Amount of Each Disbursement this Period 58.00
	[MEMO ITEM]
	Category/ Type 002

<b>B.</b> Full Name (Last, First, Middle Initial) NYC TAXI Mailing Address City New York City State NY Zip Code Purpose of Disbursement travel expense - transportation 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.4984.3 Date of Disbursement 01 / 29 / 2011
	Amount of Each Disbursement this Period 13.80
	[MEMO ITEM]
	Category/ Type 002

<b>C.</b> Full Name (Last, First, Middle Initial) New York Palace Hotel Mailing Address 455 Madison Avenue City New York State NY Zip Code 10022 Purpose of Disbursement fundraising travel expense - hotel 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.4984.4 Date of Disbursement 01 / 29 / 2011
	Amount of Each Disbursement this Period 1392.58
	[MEMO ITEM]
	Category/ Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)  
THOROUGHBRED PAC

A.

Full Name (Last, First, Middle Initial)  
Bergdorf Goodman

Mailing Address 5th Avenue at 58th Street

City State Zip Code  
New York NY 10019

Purpose of Disbursement  
fundraising travel expense - food  
Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.4984.5  
Date of Disbursement

01 / 29 / 2011

Amount of Each Disbursement this Period

55.41

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Platinum Plus for Business/Business Card

Mailing Address PO Box 15469

City State Zip Code  
Wilmington DE 19850

Purpose of Disbursement  
credit card: see memo  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.4985  
Date of Disbursement

02 / 17 / 2011

Amount of Each Disbursement this Period

1486.28

C.

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address multiple locations

City State Zip Code

Purpose of Disbursement  
fundraising travel expense  
Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB21B.4985.0  
Date of Disbursement

02 / 17 / 2011

Amount of Each Disbursement this Period

62.35

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1486.28

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)  
THOROUGHbred PAC

<b>A.</b> Full Name (Last, First, Middle Initial) USAirways <hr/> Mailing Address multiple locations <hr/> City State Zip Code <hr/> Purpose of Disbursement fundraising travel expense Candidate Name <hr/> 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.4985.1 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 1
	Amount of Each Disbursement this Period 10.00
	[MEMO ITEM]
	Category/Type 002

<b>B.</b> Full Name (Last, First, Middle Initial) Biltmore Hotel <hr/> Mailing Address 2400 E Missouri Ave <hr/> City State Zip Code Phoenix AZ 85016 <hr/> Purpose of Disbursement fundraising travel expense - hotel & food Candidate Name <hr/> 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.4985.2 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 1
	Amount of Each Disbursement this Period 1211.81
	[MEMO ITEM]
	Category/Type 002

<b>C.</b> Full Name (Last, First, Middle Initial) High Mountain Taxi <hr/> Mailing Address 57 Edwards Access Road <hr/> City State Zip Code Edwards CO 81637 <hr/> Purpose of Disbursement fundraising travel expense Candidate Name <hr/> 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.4985.3 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 1
	Amount of Each Disbursement this Period 134.90
	[MEMO ITEM]
	Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

**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)  
THOROUGHBRED PAC

A.	Full Name (Last, First, Middle Initial) Clydes	Transaction ID: SB21B.4985.4 Date of Disbursement MM / DD / YYYY 02 / 17 / 2011
	Mailing Address 5441 Wisconsin Avenue	Amount of Each Disbursement this Period 67.22
	City Bethesda State MD Zip Code 20815	
	Purpose of Disbursement fundraising expense - food Candidate Name	003 Category/Type
	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) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Platinum Plus for Business/Business Card	Transaction ID: SB21B.4986 Date of Disbursement MM / DD / YYYY 04 / 14 / 2011
	Mailing Address PO Box 15469	Amount of Each Disbursement this Period 1039.05
	City Wilmington State DE Zip Code 19850	
	Purpose of Disbursement credit card: see memo Candidate Name	001 Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Spago Beverly Hills	Transaction ID: SB21B.4986.0 Date of Disbursement MM / DD / YYYY 04 / 14 / 2011
	Mailing Address 176 North Canon Drive	Amount of Each Disbursement this Period 1000.00
	City Beverly Hills State CA Zip Code 90210	
	Purpose of Disbursement fundraising event expense - venue & food Candidate Name	003 Category/Type
	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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1039.05
<b>TOTAL</b> 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)  
THOROUGHBRED PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Platinum Plus for Business/Business Card Mailing Address PO Box 15469 City Wilmington State DE Zip Code 19850 Purpose of Disbursement credit card: see memo 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.4987 Date of Disbursement 06 / 24 / 2011
	Amount of Each Disbursement this Period 5004.00 Category/Type: 001

<b>B.</b> Full Name (Last, First, Middle Initial) DC Parking Meters Mailing Address City Washington State DC Zip Code Purpose of Disbursement parking 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.4987.0 Date of Disbursement 06 / 24 / 2011
	Amount of Each Disbursement this Period 4.00 Category/Type: 002 [MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) The Beverly Hills Hotel Mailing Address Sunset Blvd City Beverly Hills State CA Zip Code 90210 Purpose of Disbursement fundraising event expense - venue 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.4987.1 Date of Disbursement 06 / 24 / 2011
	Amount of Each Disbursement this Period 5000.00 Category/Type: 002 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5004.00
<b>TOTAL</b> 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)  
THOROUGHbred PAC

A.	Full Name (Last, First, Middle Initial) The Gula Graham Group	Transaction ID: SB21B.4992 Date of Disbursement 01 / 05 / 2011
	Mailing Address 700 12th Street, NW Suite 700	Amount of Each Disbursement this Period 6484.84
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement fundraising event expenses - travel, food & venue Candidate Name	003 Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) The Gula Graham Group	Transaction ID: SB21B.4993 Date of Disbursement 01 / 31 / 2011
	Mailing Address 700 12th Street, NW Suite 700	Amount of Each Disbursement this Period 2360.04
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement fundraising expenses - consulting & event food Candidate Name	003 Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) The Gula Graham Group	Transaction ID: SB21B.4994 Date of Disbursement 04 / 06 / 2011
	Mailing Address 700 12th Street, NW Suite 700	Amount of Each Disbursement this Period 997.28
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement fundraising event expenses - food & solicitation Candidate Name	003 Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9842.16
<b>TOTAL</b> 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 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)  
THOROUGHBRED PAC

A.	Full Name (Last, First, Middle Initial) The Gula Graham Group	Transaction ID: SB21B.4996 Date of Disbursement 06 / 17 / 2011
	Mailing Address 700 12th Street, NW Suite 700	Amount of Each Disbursement this Period 722.32
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement fundraising expenses - travel Candidate Name	003 Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.4997 Date of Disbursement 06 / 05 / 2011
	Mailing Address 1050 Connecticut Avenue, NW	Amount of Each Disbursement this Period 48.00
	City Washington State DC Zip Code 20035	
	Purpose of Disbursement PO Box renewal Candidate Name	001 Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Wachovia	Transaction ID: SB21B.4998 Date of Disbursement 01 / 11 / 2011
	Mailing Address 1100 Connecticut Ave, NW	Amount of Each Disbursement this Period 10.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement bank charge Candidate Name	001 Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>780.32</b>
<b>TOTAL</b> 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 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)  
THOROUGHbred PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wachovia</p> <p>Mailing Address 1100 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4999</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Wachovia</p> <p>Mailing Address 1100 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wachovia</p> <p>Mailing Address 1100 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5001</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>

**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)

PAGE 27 / 32

<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)  
THOROUGHBRED PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Wachovia <hr/> Mailing Address 1100 Connecticut Ave, NW <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement bank charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5002 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1	Amount of Each Disbursement this Period 10.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Wachovia <hr/> Mailing Address 1100 Connecticut Ave, NW <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement bank charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5003 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 1 1	Amount of Each Disbursement this Period 10.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	20.00
<b>TOTAL</b> This Period (last page this line number only) .....	22339.43

**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)  
THOROUGHbred PAC

**A.** Full Name (Last, First, Middle Initial)  
ALLEN WEST FOR CONGRESS

Mailing Address PO BOX 1028

City DEERFIELD BEACH State FL Zip Code 33443

Purpose of Disbursement  
campaign contribution

Candidate Name  
ALLEN B WEST

Office Sought:  House  
 Senate  
 President  
State: FL District: 22

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5058

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
BASS VICTORY COMMITTEE

Mailing Address PO Box 3451  
PO Box 3451

City Concord State NH Zip Code 03302

Purpose of Disbursement  
campaign contribution

Candidate Name  
CHARLES F. BASS

Office Sought:  House  
 Senate  
 President  
State: NH District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5061

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

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

Mailing Address PO BOX 185

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement  
campaign contribution

Candidate Name  
MICHAEL G. FITZPATRICK

Office Sought:  House  
 Senate  
 President  
State: PA District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5062

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

**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)

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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)  
THOROUGHbred PAC

A.

Full Name (Last, First, Middle Initial)  
FRIENDS OF FRANK GUINTA

Mailing Address P.O. BOX 877

City State Zip Code  
MANCHESTER NH 03105

Purpose of Disbursement  
campaign contribution

Candidate Name  
FRANK GUINTA

Office Sought:  House  
 Senate  
 President

State: NH District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5065

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
GEOFF DAVIS FOR CONGRESS

Mailing Address PO BOX 17192

City State Zip Code  
FT MITCHELL KY 41017

Purpose of Disbursement  
campaign contribution

Candidate Name  
GEOFFREY C. DAVIS

Office Sought:  House  
 Senate  
 President

State: KY District: 04

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5042

Date of Disbursement

05 / 05 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
GIBBS FOR CONGRESS

Mailing Address 6992 TR 466

City State Zip Code  
LAKEVILLE OH 44638

Purpose of Disbursement  
campaign contribution

Candidate Name  
ROBERT BRIAN MR. GIBBS

Office Sought:  House  
 Senate  
 President

State: OH District: 18

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5051

Date of Disbursement

06 / 01 / 2011

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)  
THOROUGHbred PAC

A.

Full Name (Last, First, Middle Initial)  
LATHAM FOR CONGRESS

Transaction ID: SB23.5068  
Date of Disbursement

Mailing Address PO BOX 8237

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	1

City DES MOINES State IA Zip Code 50301

Amount of Each Disbursement this Period

Purpose of Disbursement  
campaign contribution

011
Category/ Type

1000.00
---------

Candidate Name  
THOMAS LATHAM

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

B.

Full Name (Last, First, Middle Initial)  
LEE TERRY FOR CONGRESS

Transaction ID: SB23.5048  
Date of Disbursement

Mailing Address PO BOX 540098

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	1

City OMAHA State NE Zip Code 68154

Amount of Each Disbursement this Period

Purpose of Disbursement  
campaign contribution

011
Category/ Type

1000.00
---------

Candidate Name  
LEE TERRY

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NE District: 02

C.

Full Name (Last, First, Middle Initial)  
MCKINLEY FOR CONGRESS

Transaction ID: SB23.5045  
Date of Disbursement

Mailing Address 32 20TH STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	1

City WHEELING State WV Zip Code 26003

Amount of Each Disbursement this Period

Purpose of Disbursement  
campaign contribution

011
Category/ Type

1000.00
---------

Candidate Name  
DAVID B MCKINLEY

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WV District: 01

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

3000.00
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TOTAL This Period (last page this line number only) .....

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**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)  
THOROUGHbred PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>POMPEO FOR CONGRESS INC</b>  Mailing Address <b>PO BOX 780146</b>  City <b>WICHITA</b> State <b>KS</b> Zip Code <b>67212</b>  Purpose of Disbursement campaign contribution Candidate Name <b>MICHAEL RICHARD POMPEO</b>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: <b>KS</b> District: <b>04</b>	<b>Transaction ID: SB23.5039</b> Date of Disbursement M M / D D / Y Y Y Y <b>05 / 04 / 2011</b>  Amount of Each Disbursement this Period <b>1000.00</b>  Category/ Type <b>011</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>STEVE CHABOT FOR CONGRESS</b>  Mailing Address <b>3030 HARRISON AVENUE</b> <b>3014 Harrison Ave.</b>  City <b>CINCINNATI</b> State <b>OH</b> Zip Code <b>45211</b>  Purpose of Disbursement campaign contribution Candidate Name <b>STEVE CHABOT</b>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: <b>OH</b> District: <b>01</b>	<b>Transaction ID: SB23.5038</b> Date of Disbursement M M / D D / Y Y Y Y <b>03 / 30 / 2011</b>  Amount of Each Disbursement this Period <b>1000.00</b>  Category/ Type <b>011</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>STIVERS FOR CONGRESS</b>  Mailing Address <b>4679 WINTERSET DRIVE</b>  City <b>COLUMBUS</b> State <b>OH</b> Zip Code <b>43220</b>  Purpose of Disbursement campaign contribution Candidate Name <b>STEVE MR. STIVERS</b>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: <b>OH</b> District: <b>15</b>	<b>Transaction ID: SB23.5054</b> Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2011</b>  Amount of Each Disbursement this Period <b>1000.00</b>  Category/ Type <b>011</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>12000.00</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)

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<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
THOROUGHbred PAC

A.

Full Name (Last, First, Middle Initial)  
Todd P'Pool for Attorney General

Transaction ID: SB29.5032

Date of Disbursement

Mailing Address P.O. Box 24826

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

City Lexington State KY Zip Code 40524

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
non-federal campaign contribution

011
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Category/  
Type

Candidate Name  
Todd P'Pool

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Williams Farmer 2011

Transaction ID: SB29.5035

Date of Disbursement

Mailing Address PO Box 4167

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

City Frankfort State KY Zip Code 40604

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
non-federal campaign contribution

011
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Category/  
Type

Candidate Name  
Williams Farmer

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2000.00
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TOTAL This Period (last page this line number only) ..... ►

2000.00
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