

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

RECEIVED
2013 OCT 18 AM 11:56
FEDERAL CENTER

1. (a) Name of Individual, Organization or Corporation GOPAC, INC.		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C90014655</div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1101 16TH ST NW STE. 400		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

MM / DD / YYYY 07 / 01 / 2013	/	MM / DD / YYYY 09 / 30 / 2013
THROUGH		

6. TOTAL CONTRIBUTIONS	0.00
7. TOTAL INDEPENDENT EXPENDITURES	35988.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
WILLIAM JOHNSON	<i>William Johnson</i>	10-15-13

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
GOPAC, INC.

Full Name (Last, First, Middle Initial) of Payee ALELECT		Date MM / DD / YYYY 08 / 08 / 2013
Mailing Address 4949 NOTTINGHAM LANE		Amount 500.00 Transaction ID : F57.4100
City BIRMINGHAM	State AL	
Zip Code 35223		
Purpose of Expenditure LIST RENTAL EXPENSE	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHAD FINCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 500.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary

Full Name (Last, First, Middle Initial) of Payee ALELECT		Date MM / DD / YYYY 09 / 16 / 2013
Mailing Address 4949 NOTTINGHAM LANE		Amount 500.00 Transaction ID : F57.4112
City BIRMINGHAM	State AL	
Zip Code 35223		
Purpose of Expenditure LIST RENTAL EXPENSE	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHAD FINCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 35988.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary

Full Name (Last, First, Middle Initial) of Payee DIRECT MAIL SYSTEMS/DIRECT RESPONSE MARKETING		Date MM / DD / YYYY 08 / 08 / 2013
Mailing Address 12450 AUTOMOBILE BLVD		Amount 2494.00 Transaction ID : F57.4103
City CLEARWATER	State FL	
Zip Code 33762		
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHAD FINCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2994.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary

(a) SUBTOTAL of Itemized Independent Expenditures.....	3494.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
GOPAC, INC.

Full Name (Last, First, Middle Initial) of Payee DIRECT MAIL SYSTEMS/DIRECT RESPONSE MARKETING		Date MM / DD / YYYY 08 / 30 / 2013
Mailing Address 12450 AUTOMOBILE BLVD		Amount 2494.00 Transaction ID : F57.4111
City CLEARWATER	State FL	
Zip Code 33762		
Purpose of Expenditure DIRECT MAIL EXPENSE	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHAD FINCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 35488.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary

Full Name (Last, First, Middle Initial) of Payee GREENER AND HOOK		Date MM / DD / YYYY 08 / 28 / 2013
Mailing Address 2101 WILSON BLVD STE 402		Amount 30000.00 Transaction ID : F57.4107
City ARLINGTON	State VA	
Zip Code 22201		
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHAD FINCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 32994.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special-Primary

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	32494.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	35988.00

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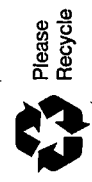
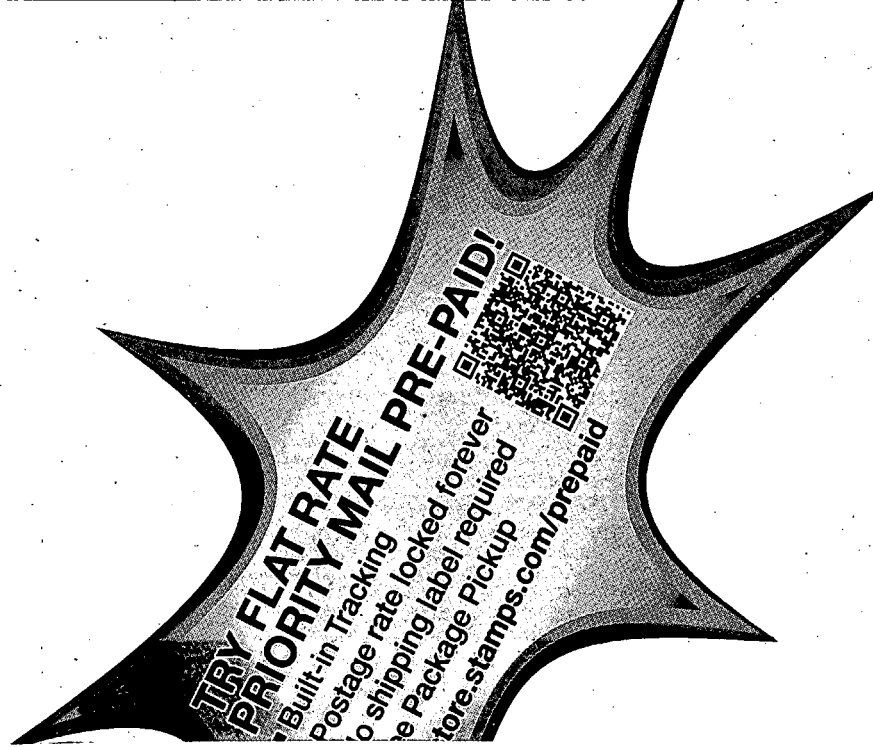
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SHIP TO: FEDERAL ELECTION COMMISSION
999 E Street NW
Washington DC 20463-0001

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FEC F-5



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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
JR PREPARER (3/2005)	10/21/2013 DATE PREPARED