

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
Business-Industry Political Action Committee

ADDRESS (number and street) 888 16th Street, NW
 Check if different than previously reported. (ACC)
Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00001727
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 (12S)
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 07 01 2010 through 07 31 2010

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 Mr. Mark Archuleta

Signature of Treasurer Electronically Filed by Mr. Mark Archuleta Date 08 20 2010

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

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Business-Industry Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		130477.28
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	137719.42									
(c) Total Receipts (from Line 19)	22.89	45881.53								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	137742.31	176358.81								
7. Total Disbursements (from Line 31)	22813.27	61429.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	114929.04	114929.04								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Business-Industry Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	24500.00
(ii) Unitemized	0.00	2700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	27200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	18500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	45700.00
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.)	22.89	181.53
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))	22.89	45881.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	22.89	45881.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2813.27	19929.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2813.27	19929.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	41500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	22813.27	61429.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22813.27	61429.77

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 15

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)	0.00	45700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	45700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2813.27	19929.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2813.27	19929.77

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

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)
Business-Industry Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) 1600 Eye Street Corporation</p> <p>Mailing Address 888 16th Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Office Rent & Utilities</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>Transaction ID: SB21B.11464</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="427.11"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BIPAC - Analysis Fund</p> <p>Mailing Address 888 16th Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Employee Net Payroll Distribution</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>Transaction ID: SB21B.11487</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="719.16"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) BIPAC - Analysis Fund</p> <p>Mailing Address 888 16th Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Employee 401-k Plan Contributions</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>Transaction ID: SB21B.11488</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="292.18"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

B. Form/Schedule : **SB21B**
Transaction ID : **SB21B.11487**

Net payroll distribution for the following employees: Mark Archuleta - \$410.38, Mary Bogert - \$23.2-6, Bernadette Budde - \$132.04, Greg Casey - \$122.16, David Hawxhurst - \$13.60 and Kelly Zavala - \$17-.72.

**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

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)
Business-Industry Political Action Committee

A. Full Name (Last, First, Middle Initial) BIPAC - Analysis Fund Mailing Address 888 16th Street, NW City Washington State DC Zip Code 20006 Purpose of Disbursement State & Federal Payroll Taxes 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.11489 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 1 0
	Category/Type Amount of Each Disbursement this Period 521.35	

B. Full Name (Last, First, Middle Initial) MadWolf Technologies, LLC Mailing Address 818 Connecticut Avenue, NW City Washington State DC Zip Code 20006 Purpose of Disbursement Computer Network Maintenance 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.11480 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 1 0
	Category/Type Amount of Each Disbursement this Period 16.09	

C. Full Name (Last, First, Middle Initial) Optimum Choice, Inc. Mailing Address P.O. Box 75051 City Baltimore State MD Zip Code 21275-5051 Purpose of Disbursement Employee Health & Dental Insurance 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.11458 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Category/Type Amount of Each Disbursement this Period 115.83	

SUBTOTAL of Disbursements This Page (optional) ▶	653.27
TOTAL 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)

<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

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)
Business-Industry Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Optimum Choice, Inc.</p> <p>Mailing Address P.O. Box 75051</p> <p>City Baltimore State MD Zip Code 21275-5051</p> <p>Purpose of Disbursement Employee Health & Dental Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11482 Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 75.17</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 64268</p> <p>City Baltimore State MD Zip Code 21264-4268</p> <p>Purpose of Disbursement Blackberry Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11469 Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 38.11</p>
<p>C. Full Name (Last, First, Middle Initial) Wiley, Rein, LLP</p> <p>Mailing Address 1776 K Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Legal Counsel Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.11463 Date of Disbursement 07 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 75.02</p>

SUBTOTAL of Disbursements This Page (optional) ▶

188.30

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

2280.02

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

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)
Business-Industry Political Action Committee

A. Full Name (Last, First, Middle Initial) CARLY FOR CALIFORNIA INC	Transaction ID: SB23.11500 Date of Disbursement																				
Mailing Address 520 CAPITOL MALL SUITE 220	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	6		2	0	1	0												
City SACRAMENTO State CA Zip Code 95814	Amount of Each Disbursement this Period 2500.00																				
Purpose of Disbursement Direct Contribution Candidate Name	<table border="1"> <tr> <td>Category/Type</td> </tr> <tr> <td> </td> </tr> </table>	Category/Type																			
Category/Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) DAN COATS FOR INDIANA	Transaction ID: SB23.11510 Date of Disbursement																				
Mailing Address PO BOX 301141	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	6		2	0	1	0												
City INDIANAPOLIS State IN Zip Code 46230	Amount of Each Disbursement this Period 2500.00																				
Purpose of Disbursement Direct Contribution Candidate Name	<table border="1"> <tr> <td>Category/Type</td> </tr> <tr> <td> </td> </tr> </table>	Category/Type																			
Category/Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) DEMME FOR CONGRESS	Transaction ID: SB23.11522 Date of Disbursement																				
Mailing Address 502 2ND ST NE PO BOX 6	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	6		2	0	1	0												
City HAYFIELD State MN Zip Code 55940	Amount of Each Disbursement this Period 1000.00																				
Purpose of Disbursement Direct Contribution Candidate Name	<table border="1"> <tr> <td>Category/Type</td> </tr> <tr> <td> </td> </tr> </table>	Category/Type																			
Category/Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

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

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

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

FOR LINE NUMBER: (check only one)

<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

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)
Business-Industry Political Action Committee

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE HECK	Transaction ID: SB23.11506
	Mailing Address PO Box 750114	Date of Disbursement 07 / 06 / 2010
	City Las Vegas State NV Zip Code 89136	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Direct Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF NAN HAYWORTH	Transaction ID: SB23.11490
	Mailing Address P. O. Box 189	Date of Disbursement 07 / 06 / 2010
	City Mount Kisco State NY Zip Code 10549	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Direct Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF TODD YOUNG	Transaction ID: SB23.11514
	Mailing Address POST OFFICE BOX 1053	Date of Disbursement 07 / 06 / 2010
	City BLOOMINGTON State IN Zip Code 47402	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Direct Contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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)
Business-Industry Political Action Committee

A.

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

Transaction ID: SB23.11494

Mailing Address PO Box 2408

Date of Disbursement

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

City Loveland State CO Zip Code 80539

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Direct Contribution

Category/ Type

Candidate Name

Office Sought: House Senate President
State: CO District: 04
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
JON BARELA FOR CONGRESS

Transaction ID: SB23.11502

Mailing Address PO BOX 92413

Date of Disbursement

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

City ALBUQUERQUE State NM Zip Code 87199

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Direct Contribution

Category/ Type

Candidate Name

Office Sought: House Senate President
State: NM District: 01
Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

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

Transaction ID: SB23.11518

Mailing Address PO Box 1050

Date of Disbursement

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

City Bourbonnais State IL Zip Code 60914

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Direct Contribution

Category/ Type

Candidate Name

Office Sought: House Senate President
State: IL District: 11
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

--

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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)
Business-Industry Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) PAT MEEHAN FOR CONGRESS</p> <p>Mailing Address 50 S PROVIDENCE ROAD PO BOX 308</p> <p>City MEDIA State PA Zip Code 19063</p> <p>Purpose of Disbursement Direct Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11496</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) RANDY HULTGREN FOR CONGRESS</p> <p>Mailing Address PO Box 39</p> <p>City Batavia State IL Zip Code 60510</p> <p>Purpose of Disbursement Direct Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 14</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11492</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ROBERT HURT FOR CONGRESS</p> <p>Mailing Address PO BOX 2</p> <p>City CHATHAM State VA Zip Code 24531</p> <p>Purpose of Disbursement Direct Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: VA District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11498</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Business-Industry Political Action Committee

A.	Full Name (Last, First, Middle Initial) ROY MORALES FOR CONGRESS	Transaction ID: SB23.11520
	Mailing Address 2450 Louisiana Suite 400-224	Date of Disbursement 07 / 06 / 2010
	City Houston State TX Zip Code 77006	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Direct Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: TX District: 29	

B.	Full Name (Last, First, Middle Initial) SAM CALIGIURI FOR CONGRESS	Transaction ID: SB23.11504
	Mailing Address PO BOX 11252	Date of Disbursement 07 / 06 / 2010
	City Waterbury State CT Zip Code 06703	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Direct Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CT District: 05	

C.	Full Name (Last, First, Middle Initial) TIM GRIFFIN FOR CONGRESS CAMPAIGN COMMITTEE	Transaction ID: SB23.11508
	Mailing Address P.O. Box 7526	Date of Disbursement 07 / 06 / 2010
	City Little Rock State AR Zip Code 72217	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Direct Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: AR District: 02	

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<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

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)
Business-Industry Political Action Committee

A. Full Name (Last, First, Middle Initial) TOM GANLEY FOR CONGRESS Mailing Address PO BOX 41331 City BRECKSVILLE State OH Zip Code 44141 Purpose of Disbursement Direct Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11516 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
B. Full Name (Last, First, Middle Initial) WALORSKI FOR CONGRESS INC Mailing Address PO Box 954 City Mishawaka State IN Zip Code 46546 Purpose of Disbursement Direct Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11512 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00