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Image# 13944068261

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	For Other Than	An Authorized	d Committee			Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT		imple: If typing, r the lines.	type	12FE4M5		
State Street Bank and	Trust Compar	ny Voluntary	Political Acti	ion Co	mmittee		
ADDRESS (number and street)	Box 5351						
Check if different than previously reported. (ACC)	Boston				MA	02206]-[
2. FEC IDENTIFICATION NU	JMBER ▼	CITY			STATE 🛦	ZIP C	ODE 🛦
C C00072751		3. IS THIS REPORT	× NEV	V OR	AN (A)	MENDED)	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15 Quarterly Report (Q January 31 Year-End Report (Y) July 31 Mid-Year Report (Non-electior Year Only) (MY) Termination Report (TER)	(c) 12-Day PRE-EI Report (d) 30-Day POST-	lection for the:	Jun		Sep	in the State	Year Only) Jan 31 (YE) Runoff (12R) Special (30S)
5. Covering Period 11		Election on	through	M M 11	/ D D /	State	of
I certify that I have examined thi		-	wledge and beli	ef it is tru	ie, correct and	d complete.	
Type or Print Name of Treasurer	J. Barry McDona	ld Jr.					
Signature of Treasurer J. Ban	rry McDonald Jr.		[Electronically Fil	led] [Date 12	17	2013
NOTE: Submission of false, errone	eous, or incomplete	information may su	ubject the person	signing tl	nis Report to the	ne penalties of 2	2 U.S.C. §437g.
Office Use						FEC FO Rev. 12	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

State Street Bank and Trust Company Voluntary Political Action Committee

2013 30 2013 Report Covering the Period: From: To: 11 **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 53843.26 January 1, 2013 (b) Cash on Hand at 90108.11 Beginning of Reporting Period..... 76450.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 90108.11 130293.26 6(a) and 6(c) for Column B)..... 4517.01 44702.16 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 85591.10 85591.10 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

State Street Bank and Trust Company Voluntary Political Action Committee

I. Receipts ibutions (other than loans) From: ndividuals/Persons Other Than Political Committees i) Itemized (use Schedule A) ii) Unitemized iii) TOTAL (add Lines 11(a)(i) and (ii)▶	To	Occumentation of the control of the		COLUMN calendar Year	
ndividuals/Persons Other Than Political Committees i) Itemized (use Schedule A) ii) Unitemized	7	0.00		7 1 7	76300.00
ii) Unitemized	7	0.00		7 7	76300.00
ii) Itemized (use Schedule A)iii) Unitemizediiii) TOTAL (add Lines 11(a)(i) and (ii)	7	0.00		7 7	76300.00
ii) Unitemized iii) TOTAL (add Lines 11(a)(i) and (ii)		0.00	1 1	7 7	
iii) TOTAL (add Lines 11(a)(i) and (ii)					
Lines 11(a)(i) and (ii)▶		2.22	-		150.00
Political Party Committees		0.00		7	76450.00
United Faity Committees		0.00			0.00
· ·		2.00	7 		
such as PACs)		0.00		7	0.00
Total Contributions (add Lines					
11(a)(iii), (b), and (c)) (Carry					
Totals to Line 33, page 5)▶		0.00		7	76450.00
fers From Affiliated/Other					
Committees	7	0.00		7 7	0.00
David of		0.00			0.00
pans Received	7	0.00		7 7	0.00
Renayments Received		0.00			0.00
	7	7 1 7			
			_		
· · · · · · · · · · · · · · · · · · ·		0.00	l		0.00
		0.00	7 F.		0.00
	7	0.00	_	7 7	0.00
·		0.00			0.00
·		0.00			0.00
		0.00	7 F.		0.00
IIIIII Scriedule 113)	7	0.00		7 7	0.00
		0.00			0.00
evin Funds (from Schedule H5)	7	0.00		7 7	0.00
otal Transfers (add 18(a) and 18(b))		0.00		7	0.00
otal Transfers (add 18(a) and 18(b)) Receipts (add Lines 11(d), 3, 14, 15, 16, 17, and 18(c))▶	7	0.00		7	7
·		0.00	1		76450.00
	Political Party Committees Other Political Committees (such as PACs)	Other Political Committees (such as PACs)	Other Political Committees Such as PACs	Other Political Committees (Such as PACs)	Other Political Committees (such as PACs)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Operating Expenditures: —	Total Tills I cilou	Calefidal Teal-to-Date	
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	17.01	202.16	
Expenditures(c) Total Operating Expenditures	17.01	202.10	
(add 21(a)(i), (a)(ii), and (b))▶	17.01	202.16	
Transfers to Affiliated/Other Party			
Committees	0.00	0.00	
Contributions to Federal Candidates/Committees			
and Other Political Committees	4500.00	44500.00	
Independent Expenditures	0.00	0.00	
(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
(use scriedule 1)		0.00	
Loan Repayments Made	0.00	0.00	
1,10			
Loans Made	0.00	0.00	
Refunds of Contributions To: (a) Individuals/Persons Other			
Than Political Committees	0.00	0.00	
4) 5 111 1 5 1 6 11	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(30011 03 1 7 03)			
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
Other Disbursements	0.00	0.00	
Fordered Floretiers Astistics (O.11.0.0. \$404/00))			
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated 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	0.00	0.00	
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4517.01	44702.16	
	4017.01	44702.10	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	4517.01	44702.16	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	76450.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	76450.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17.01	202.16
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	17.01	202.16

S 17

SCHEDULE B (FEC Form 3X)				PAGE 6 OF 8	
•	Use separate schedule(s) for each category of the				
ITEMIZED DISBURSEMENTS		X 21b	22 23 [24 25 26	
	Detailed Summary Page	27	28a 28b	28c 29 30b	
Any information copied from such Reports and State	ements may not be sold or up	sed by any ners	on for the nurnose of		
or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
\mid State Street Bank and Trust Com	pany Voluntary Politi	cal Action (Committee		
Full Name (Last, First, Middle Initial)					
A. State Street Bank and Trust Com	nanv		Date of Disbursen	nent	
			M M / D E) / Y Y Y Y Y	
Mailing Address One Lincoln Street			11 29	2013	
City	State Zip Code				
Boston	MA 02111		Transaction ID :	895C20159532FED9FB5	
Purpose of Disbursement	02111				
Bank Fee		001	Amount of Each D	Disbursement this Period	
Candidate Name		Category/		17.01	
0.00		Type		17.01	
Office Sought: House Disburs Senate	ement For: Primary General				
President	Primary General Other (specify) ▼				
State: District:	Carlor (opcony)				
Full Name (Last, First, Middle Initial)					
B.			Date of Disbursen	nent	
			M = M / D = E) / Y = Y = Y	
Mailing Address					
City	State Zip Code				
,					
Purpose of Disbursement					
Candidate Name			Amount of Each D	Disbursement this Period	
Candidate Name		Category/ Type			
Office Sought: House Disburs	ement For:	туре	1		
Senate	Primary General				
President	Other (specify) ▼				
State: District:	_				
Full Name (Last, First, Middle Initial)			Data of Biologica		
C.			Date of Disbursen		
Mailing Address			M M M / D L) / Y Y Y Y	
City	State Zip Code				
Purpose of Disbursement					
			Amount of Each D	Disbursement this Period	
Candidate Name		Category/			
Office Country		Type			
Office Sought: House Disburs Senate	ement For: Primary General				
President	Other (specify)				
State: District:	(-poon)/ \				
SUBTOTAL of Disbursements This Page (optional)			4	17.01	
				47.04	
TOTAL This Period (last page this line number onl	y)		1	17.01	

SCHEDULE B (FEC Form 3X)		FOR LINE N	IUMBER: PAGE 7 OF 8
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🗙 23 🗌 24 📗 25 📗 26
	, ,	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name ${\sf name}$			
NAME OF COMMITTEE (In Full)			
State Street Bank and Trust Compa	any Voluntary Politica	al Action C	ommittee
Full Name (Last, First, Middle Initial)			
A. Dave Camp for Congress			Date of Disbursement
Mailing Address 5915 Eastman Avenue Suite 100			11 25 2013
City	State Zip Code		Transaction ID : 839586A697A11FC0C5A
Midland	MI 48640-6824		Transaction ID: 639366A697A1TFC0C5A
Purpose of Disbursement 2014 General		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4500.00
David Lee Camp		Type	1500.00
Senate	nent For: 2014 Primary		
State: MI District: 04	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. Friends of Jeb Hensarling			Date of Disbursement
Mailing Address PO Box 820504			11 06 2013
City S Dallas	State Zip Code TX 75382-0504		Transaction ID : D44E0F8A6AA6AC1190F
Purpose of Disbursement 2014 Primary		011	Amount of Each Disbursement this Period
Candidate Name	,	Category/	1000.00
Thomas Jeb Hensarling		Type	1000.00
Senate	nent For: 2014 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
C. Katherine Clark for Congress			Date of Disbursement
Mailing Address PO Box 361			11 06 2013
•	State Zip Code MA 02148		Transaction ID : DB94E8DD1F534A9F842
Purpose of Disbursement 2013 Special General	32115	011	
Candidate Name	I		Amount of Each Disbursement this Period
Katherine M. Clark		Category/ Type	1000.00
Senate	nent For: 2013 Primary General Other (specify)	J	
State: MA District: 05	Special		
SUBTOTAL of Disbursements This Page (optional)		······	3500.00
TOTAL This Period (last page this line number only)		····· >	

SCHEDULE B (FEC Form 3X)	Han annual and the	FOR LINE	NUMBER:	PAGE 8 OF 8	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon oriny	,		
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Staten	nents may not be sold or us				
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
angle State Street Bank and Trust Comp	any Voluntary Politi	cal Action (Committee		
Full Name (Last, First, Middle Initial)					
A. Royce Campaign Committee			Date of Disburser	nent	
	M M / D	D / Y Y Y Y Y			
Mailing Address PO Box 3249			11 25	2013	
City	State Zip Code				
Fullerton	CA 92834-3249		Transaction ID	63117BB2BE2B4229672	
Purpose of Disbursement					
2014 Primary		011	Amount of Each I	Disbursement this Period	
Candidate Name Edward R. Royce		Category/		1000.00	
<u>_</u>	ment For: 2014	Туре			
	Primary General				
President	Other (specify) ▼				
State: CA District: 39					
Full Name (Last, First, Middle Initial) B.			Data of Diahuman		
ь.			Date of Disburser		
Mailing Address			M = M / D =	D	
City	State Zip Code				
Purpose of Disbursement					
·			Amount of Each I	Disbursement this Period	
Candidate Name		Category/			
Office County House		Туре			
Office Sought: House Disburser Senate	nent For: Primary General				
	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)					
C.			Date of Disburser	ment	
Mailing Address			M M / D	D / Y Y Y Y Y	
Maining Address					
City	State Zip Code				
Purpose of Disbursement					
raipeed of Biobardoment			Amount of Each I	Disbursement this Period	
Candidate Name		Category/	Amount of Edon't	Sieburgerment and Ferieu	
		Type			
Office Sought: House Disburser					
Senate President	Primary General Other (specify) ▼				
State: District:	Carior (opcony)				
[
SUBTOTAL of Disbursements This Page (optional)			7	1000.00	
				4500.00	
TOTAL This Period (last page this line number only)			1	4500.00	