

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PAC TO THE FUTURE

ADDRESS (number and street)

700 13th Street, NW

Suite 600

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344234

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  
Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
08 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
08 31 2014

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 Paul Pelosi

Signature of Treasurer

Paul Pelosi

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
09 19 2014

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

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PAC TO THE FUTURE

Report Covering the Period:

From:

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 01    |   | 2014      |

To:

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 31    |   | 2014      |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div>Y Y Y Y Y<br/>2014</div>                                                  |                         | <div>467431.63</div>              |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div>586325.98</div>    |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | <div>18500.00</div>     | <div>485574.61</div>              |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div>604825.98</div>    | <div>953006.24</div>              |
| 7. Total Disbursements (from Line 31).....                                                                       | <div>10076.76</div>     | <div>358257.02</div>              |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | <div>594749.22</div>    | <div>594749.22</div>              |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div>0.00</div>         |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div>0.00</div>         |                                   |



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)

Page 3

Write or Type Committee Name

PAC TO THE FUTURE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
08 01 2014

To:

M M / D D / Y Y Y Y Y  
08 31 2014
**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

73000.00

(ii) Unitemized .....

0.00

190.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

73190.00

(b) Political Party Committees .....

0.00

3884.61

(c) Other Political Committees

(such as PACs).....

18500.00

300500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

18500.00

377574.61

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

102000.00

## 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

1000.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

## 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 Transfers (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))..... ▶

18500.00

485574.61

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

18500.00

485574.61

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated 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 .....                                                 | 7576.76                       | 71757.02                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 7576.76                       | 71757.02                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 2500.00                       | 284500.00                         |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (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                          | 2000.00                           |
| (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                          | 2000.00                           |
| 29. Other Disbursements .....                                                                  | 0.00                          | 0.00                              |
| 30. 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 .. 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)) ..      | 10076.76                      | 358257.02                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 10076.76                      | 358257.02                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 18500.00                      | 377574.61                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 2000.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 18500.00                      | 375574.61                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 7576.76                       | 71757.02                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 1000.00                           |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 7576.76                       | 70757.02                          |

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

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

FOR LINE NUMBER: PAGE 6 OF 13  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

## **A. American Academy Of Nurse Practitioners PAC**

Mailing Address P.O. Box 40473

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C** C00358903

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**08** / **05** / **2014**

**Transaction ID : C5722770**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. Cisco Systems Inc. PAC**

Mailing Address 20 Park Rd  
 Ste E

City State Zip Code  
 Burlingame CA 94010-4443

FEC ID number of contributing  
federal political committee.

**C** C00362707

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**08** / **05** / **2014**

**Transaction ID : C5722771**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. Pacific Life Insurance Company PAC**

Mailing Address 700 Newport Center Drive

City State Zip Code  
 Newport Beach CA 92660-6307

FEC ID number of contributing  
federal political committee.

**C** C00068528

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**08** / **05** / **2014**

**Transaction ID : C5722791**

Amount of Each Receipt this Period

1000.00

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

6000.00

**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:  
(check only one)

PAGE 7 OF 13

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

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

## **A. AFLAC Inc. PAC**

Mailing Address 1932 Wynnton Road

City State Zip Code  
 Columbus GA 31999-0001

FEC ID number of contributing  
federal political committee.

**C** C00034157

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
 08 / 05 / 2014

**Transaction ID : C5722762**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Nationwide Mutual Insurance Company PAC**

Mailing Address 1 Nationwide Plz  
 1-32-301

City State Zip Code  
 Columbus OH 43215-2226

FEC ID number of contributing  
federal political committee.

**C** C00076174

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
 08 / 05 / 2014

**Transaction ID : C5722787**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. PAC of the American Assoc. of Orthopaedic Surgeons**

Mailing Address 317 Massachusetts Avenue, NE  
 First Floor

City State Zip Code  
 Washington DC 20002

FEC ID number of contributing  
federal political committee.

**C** C00343137

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
 08 / 05 / 2014

**Transaction ID : C5722797**

Amount of Each Receipt this Period

1500.00

**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:  
(check only one)

PAGE 8 OF 13

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

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NAME OF COMMITTEE (In Full)

**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

## **A. American Hotel And Lodging Association Political Action Committee**

Mailing Address 1201 New York Ave NW  
 FI 6

City State Zip Code  
 Washington DC 20005-3917

FEC ID number of contributing  
federal political committee.

**C** C00001198

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  
 08 05 2014

**Transaction ID : C5722778**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. Safeway Inc. PAC**

Mailing Address 5918 Stoneridge Mall Rd

City State Zip Code  
 Pleasanton CA 94588-3229

FEC ID number of contributing  
federal political committee.

**C** C00194084

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  
 08 05 2014

**Transaction ID : C5723218**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

5000.00

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

18500.00

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

### A. Elavon Merchant Services

Date of Disbursement



Transaction ID : D406390

Amount of Each Disbursement this Period

| Age Group | Percentage |
|-----------|------------|
| 18-24     | 17.0       |
| 25-34     | 15.0       |
| 35-44     | 13.0       |
| 45-54     | 11.0       |
| 55-64     | 9.0        |
| 65-74     | 7.0        |
| 75-84     | 5.0        |
| 85+       | 3.0        |

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B. Melissa Kurek

Date of Disbursement

08 / 11 / 2014

Transaction ID : D408241

Amount of Each Disbursement this Period

2500.00

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

Full Name (Last, First, Middle Initial)

### C. Michael Smith

Date of Disbursement

08 / 11 / 2014

Transaction ID : D408242

Amount of Each Disbursement this Period

A diagram of a rectangular frame structure. The frame consists of four vertical members and four horizontal members. The joints are labeled as follows: 1 at the top-left corner, 2 at the top-right corner, 3 at the bottom-right corner, and 4 at the bottom-left corner.

2000.00

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

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

4501.70

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 13

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Becca Durr**Mailing Address 333 C St SE  
Basement Unit

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 11 2014

Transaction ID : D408243

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Becca Durr**Mailing Address 333 C St SE  
Basement Unit

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 11 2014

Transaction ID : D408244

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Elavon Merchant Services**

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement  
Merchant Service Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 04 2014

Transaction ID : D406387

Amount of Each Disbursement this Period

159.42

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

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

1159.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 13

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**Mailing Address 1201 Third Avenue  
Suite 4800

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 13 2014**Transaction ID : D408228**

Amount of Each Disbursement this Period

1556.86

Full Name (Last, First, Middle Initial)

**B. Elavon Merchant Services**

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement  
Merchant Service Fees

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 04 2014**Transaction ID : D406388**

Amount of Each Disbursement this Period

62.94

Full Name (Last, First, Middle Initial)

**C. Deluxe Business Checks & Solutions**

Mailing Address 3680 Victoria Street North

City Shoreview State MN Zip Code 55126

Purpose of Disbursement  
Printing

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 29 2014**Transaction ID : D409229**

Amount of Each Disbursement this Period

205.65

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

1825.45

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

### A. Elavon Merchant Services

Date of Disbursement



Transaction ID : D406389

Category/  
Type

Amount of Each Disbursement this Period

| President | Very satisfied (%) |
|-----------|--------------------|
| Biden     | 60.19              |

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

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

60.19

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

7546.76

|  |     |  |     |   |     |  |     |  |    |  |     |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
|  | 21b |  | 22  | X | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |   | 28b |  | 28c |  | 29 |  | 30b |

FEC Schedule B (Form 3X) Rev. 02/2003