

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
2012 DEC 10 AM 11:53  
Office Use Only

1. NAME OF COMMITTEE (in full) **KTADAPAC** TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5 REC MAIL CENTER

ADDRESS (number and street) **5111 W GENESEE ST**  
CITY ▲ **CAMILLUS** STATE ▲ **NY** ZIP CODE ▲ **13031**

2. FEC IDENTIFICATION NUMBER ▼ **C00535211** 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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)

Election on  in the State of

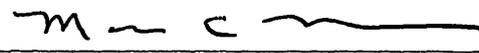
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)

Election on  in the State of

5. Covering Period **10 18 2012** through **12 06 2012**

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 **MARVIN C. MEISSNER**

Signature of Treasurer  Date **12 06 2012**

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

12030973297

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**KTADAPAC**

Report Covering the Period:

From:

MM / DD / YYYY  
10 / 18 / 2012

To:

MM / DD / YYYY  
12 / 06 / 2012

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) Total Receipts (from Line 19).....	<input type="text" value="2,469.90"/>	<input type="text" value="2,469.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2,469.90"/>	<input type="text" value="2,469.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2,099.80"/>	<input type="text" value="2,099.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="370.10"/>	<input type="text" value="370.10"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	<input type="text" value="0"/>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	<input type="text" value="0"/>

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

12030973298

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

KTADA PAC

Report Covering the Period: From:

MM / DD / YYYY  
10 / 18 / 2012

To:

MM / DD / YYYY  
12 / 06 / 2012

## 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).....

750.00

750.00

(ii) Unitemized.....

570.00

570.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1,320.00

1,320.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

100.00

100.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1,420.00

1,420.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

1,049.90

1,049.90

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

2,469.90

2,469.90

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

2,469.90

2,469.90

12030973299

**DETAILED SUMMARY PAGE**  
of Disbursements

12030973300

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	1,049.90	1,049.90
26. Loan Repayments Made .....	1,049.90	1,049.90
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2,099.80	2,099.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	2,099.80	2,099.80

**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

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3).....
- 34. Total Contribution Refunds  
(from Line 28(d)).....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33).....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)).....▶
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3).....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36).....▶

1,420.00
1,420.00
1,420.00
1,420.00
1,420.00
1,420.00
1,420.00

1,420.00
1,420.00
1,420.00
1,420.00
1,420.00
1,420.00
1,420.00

12030973301

**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 ( OF )
	<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	

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)  
**KTADA PAC**

A. Full Name (Last, First, Middle Initial)  
**BUNN, NANCY, C.**

Mailing Address  
**4361 CHILMARK ST**

City **MARCELLUS** State **NY** Zip Code **13108**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**10 23 2012**

Amount of Each Receipt this Period  
**250.00**

B. Full Name (Last, First, Middle Initial)  
**ARNOLD, LYDIA, P**

Mailing Address  
**115 SEDGWICK RD.**

City **SYRACUSE** State **NY** Zip Code **13203**

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

Name of Employer **SYRACUSE UNIVERSITY** Occupation **LAW PROFESSOR**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**10 25 2012**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ..... ▶ **750.00**

TOTAL This Period (last page this line number only) ..... ▶ **750.00**

12030973302

# 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 1 OF 1	
<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**KTADAPAC**

120309733034 STATE

A. Full Name (Last, First, Middle Initial)  
**COMMUNITIES FOR KATHLEEN JOY**

Mailing Address  
**147 SOUTH AVE**

City **SYRACUSE** State **NY** Zip Code **13204**

FEC ID number of contributing federal political committee.  
**STATE** **0A83106**

Name of Employer **N/A** Occupation **N/A**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**100.00**

Date of Receipt  
**11 / 26 / 2012**

Amount of Each Receipt this Period  
**100.00**

B. Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶ **100.00**

TOTAL This Period (last page this line number only).....▶ **100.00**

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 4 OF 4
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**KTADA PAC**

A. Full Name (Last, First, Middle Initial)  
**JOUSTON, DANA, C**

Mailing Address  
**40 KTADAPAC 5111 W. GENESEE ST**

City **CAMILLUS** State **NY** Zip Code **13031**

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

Name of Employer **N/A** Occupation **WRITER  
MARKETING CONSULTANT**

Receipt For:  
 Primary  
 General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1,049.90**

Date of Receipt  
**11 07 2012**

Amount of Each Receipt this Period  
**241.92**

B. Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶ **241.92**

TOTAL This Period (last page this line number only).....▶ **1,049.90**

12030973304

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 3 OF 4	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input checked="" 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)  
KTADAPAC

A. Full Name (Last, First, Middle Initial)  
JOHNSTON, DANA, C

Mailing Address  
c/o KTADAPAC 5111 W GENESEE ST

City CAMILLUS State NY Zip Code 13031

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation WRITER  
MARKETING CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
507.98

Date of Receipt  
11 04 2012

Amount of Each Receipt this Period  
50.00

B. Full Name (Last, First, Middle Initial)  
JOHNSTON, DANA, C

Mailing Address  
c/o KTADAPAC 5111 W GENESEE ST

City CAMILLUS State NY Zip Code 13031

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation WRITER  
MARKETING CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
557.98

Date of Receipt  
11 05 2012

Amount of Each Receipt this Period  
50.00

C. Full Name (Last, First, Middle Initial)  
JOHNSTON, DANA, C

Mailing Address  
c/o KTADAPAC 5111 W GENESEE ST

City CAMILLUS State NY Zip Code 13031

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation WRITER  
MARKETING CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
807.98

Date of Receipt  
11 06 2012

Amount of Each Receipt this Period  
250.00

SUBTOTAL of Receipts This Page (optional).....▶ 350.00

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

12030973305

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 4

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**KTADAPAC**

Full Name (Last, First, Middle Initial)  
A. **JOHNSTON, DANA, C**

Mailing Address  
**C/O KTADAPAC 5111 W GENESEE ST**

City **CAMILLUS** State **NY** Zip Code **13031**

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

Name of Employer **N/A** Occupation **WRITER**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **349.90**

Date of Receipt  
**10 26 2012**

Amount of Each Receipt this Period  
**143.88**

Full Name (Last, First, Middle Initial)  
B. **JOHNSTON, DANA, C**

Mailing Address  
**C/O KTADAPAC 5111 W GENESEE ST**

City **CAMILLUS** State **NY** Zip Code **13031**

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

Name of Employer **N/A** Occupation **WRITER  
MARKETING CONSULTANT**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **407.98**

Date of Receipt  
**11 02 2012**

Amount of Each Receipt this Period  
**58.08**

Full Name (Last, First, Middle Initial)  
C. **JOHNSTON, DANA, C**

Mailing Address  
**C/O KTADAPAC 5111 W. GENESEE ST**

City **CAMILLUS** State **NY** Zip Code **13031**

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

Name of Employer **N/A** Occupation **WRITER  
MARKETING CONSULTANT**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **457.98**

Date of Receipt  
**11 03 2012**

Amount of Each Receipt this Period  
**50.00**

SUBTOTAL of Receipts This Page (optional)..... **251.96**

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

12030973306

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 1 OF 4	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input checked="" 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)  
**KTADAPAC**

Full Name (Last, First, Middle Initial) <b>A. JOHNSTON, DANA, C</b>		Date of Receipt M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>c/o KTADAPAC 5111 W GENESEE ST</b>		Amount of Each Receipt this Period <b>42.47</b>
City <b>CAMILLUS</b>	State Zip Code <b>NY 13031</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>42.47</b>
Name of Employer <b>N/A</b>	Occupation <b>WRITER MARKETING CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>42.47</b>	

Full Name (Last, First, Middle Initial) <b>B. JOHNSTON, DANA, C</b>		Date of Receipt M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address <b>c/o KTADAPAC 5111 W GENESEE ST</b>		Amount of Each Receipt this Period <b>95.88</b>
City <b>CAMILLUS</b>	State Zip Code <b>NY 13031</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>95.88</b>
Name of Employer <b>N/A</b>	Occupation <b>WRITER MARKETING CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>138.35</b>	

Full Name (Last, First, Middle Initial) <b>C. JOHNSTON, DANA, C</b>		Date of Receipt M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>c/o KTADAPAC 5111 W GENESEE ST</b>		Amount of Each Receipt this Period <b>67.67</b>
City <b>CAMILLUS</b>	State Zip Code <b>NY 13031</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>67.67</b>
Name of Employer <b>N/A</b>	Occupation <b>WRITER MARKETING CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>206.02</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>206.02</b>
TOTAL This Period (last page this line number only).....▶	

12030973307

**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	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)  
**KTADA PAC**

Full Name (Last, First, Middle Initial) <b>A. JOHNSTON, DANA, C</b>		Date of Disbursement MM/DD/YYYY <b>11/29/2012</b>	
Mailing Address <b>c/o KTADAPAC 5111 W GENESEE ST</b>		Amount of Each Disbursement this Period <b>1,049.90</b>	
City <b>CAMILLUS</b>	State <b>NY</b>		Zip Code <b>13031</b>
Purpose of Disbursement <b>LOAN REPAYMENT</b>			Category/Type <b>009</b>
Candidate Name <b>ANN MARIE BURKLE</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>NY</b>	District: <b>24</b>		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM/DD/YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State		Zip Code
Purpose of Disbursement			Category/Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM/DD/YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State		Zip Code
Purpose of Disbursement			Category/Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	
TOTAL This Period (last page this line number only).....▶	<b>1,049.90</b>

12030973308

**SCHEDULE C (FEC Form 3X)**

**LOANS**

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

PAGE 1 OF 1  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**KTADAPAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**JOHNSTON, DANA, C**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**c/o KTADAPAC 5111 W GENESEE ST**

City **CAMILLUS** State **NY** ZIP Code **13031**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,049.90	1,049.90	0

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM/DD/YYYY 10/18/2012	MM/DD/YYYY 11/29/2012	% (apr) 0	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional) ..... ▶

**TOTALS** This Period (last page in this line only) ..... ▶ **1,049.90**

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1203097309

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 10

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
**KTADAPAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JOHNSTON, DANA C</b>	Nature of Debt (Purpose): <b>PROVIDE INITIAL FUNDING</b>
Mailing Address <b>C/O KTADAPAC 5111 W GENESEE ST</b>	
City State Zip Code <b>CAMILLUS NY 13031</b>	

Outstanding Balance Beginning This Period <b>0</b>	Amount Incurred This Period <b>1,049.90</b>	Payment This Period <b>1,049.90</b>	Outstanding Balance at Close of This Period <b>0</b>
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B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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1) SUBTOTALS This Period This Page (optional).....▶	
2) TOTALS This Period (last page this line number only).....▶	<b>1,049.90</b>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	<b>0</b>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	<b>1,049.90</b>

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**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>KTADAPAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C 00535211</b>
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Check if  24-hour report  48-hour report  New report  Amends report filed on \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee <b>YAHOO</b>		Date M M / D D / Y Y Y Y <b>10 26 2012</b>
Mailing Address <b>701 FIRST AVE</b>		Amount <b>, 239.76</b>
City <b>SUNNYVALE</b>	State Zip Code <b>CA 94089</b>	
Purpose of Expenditure <b>ADVERTISING</b>	Category/Type <b>004</b>	Office Sought: <input checked="" type="checkbox"/> House State: <b>NY</b> <input type="checkbox"/> Senate District: <b>24</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>ANN MARIE BUEKLE</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>, 239.76</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>FACEBOOK INC</b>		Date M M / D D / Y Y Y Y <b>11 07 2012</b>
Mailing Address <b>1601 WILLOW RD</b>		Amount <b>, 700.00</b>
City <b>MENLO PARK</b>	State Zip Code <b>CA 94025</b>	
Purpose of Expenditure <b>ADVERTISING</b>	Category/Type <b>004</b>	Office Sought: <input checked="" type="checkbox"/> House State: <b>NY</b> <input type="checkbox"/> Senate District: <b>24</b> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>ANN MARIE BUEKLE</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>, 700.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>, 939.76</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<b>, 110.14</b>
(c) TOTAL Independent Expenditures.....▶	<b>, 1,049.90</b>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

M - C \_\_\_\_\_ Date **12 06 2012**

Signature

12030973311

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>12/6/12</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*[Signature]*

PREPARER  
(3/2005)

*12/10/12*

DATE PREPARED

12030973312