

**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.

STUDENT DEBT REFORM PAC

ADDRESS (number and street) 2250 NORTH SHEFFIELD AVE SUITE 317

Check if different than previously reported. (ACC) DEPAUL MAIL CENTER MLBX 258 CHICAGO IL 60614

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00571034

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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - 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  /  /  through  /  /

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. Colin Mackintosh

Signature of Treasurer *Mr. Colin Mackintosh* [Electronically Filed] Date  /  /

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										<b>FEC FORM 3X</b> Rev. 12/2004
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**STUDENT DEBT REFORM PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="16.00"/>	<input type="text" value="16.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="372.43"/>	<input type="text" value="372.43"/>
(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="388.43"/>	<input type="text" value="388.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="90.69"/>	<input type="text" value="90.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="297.74"/>	<input type="text" value="297.74"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

STUDENT DEBT REFORM PAC

Report Covering the Period: From: 01 / 01 / 2015 To: 03 / 31 / 2015

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).....	372.43	372.43
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	372.43	372.43
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	372.43	372.43
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.).....	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))..... ▶	372.43	372.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	372.43	372.43

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	90.69	90.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	90.69	90.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	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) 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)) ..	90.69	90.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	90.69	90.69

**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) .....	372.43	372.43
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	372.43	372.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	90.69	90.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	90.69	90.69

**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 6 OF 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**STUDENT DEBT REFORM PAC**

Full Name (Last, First, Middle Initial)  
**A. Addison Caruso**

Mailing Address 185 Lookout Drive

City Dayton State OH Zip Code 45419

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

Name of Employer Student Occupation Miami Univesity

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 13 / 2015  
**Transaction ID : SA11AI.4235**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. Ann Fulford Fulford**

Mailing Address 219 Orchard Drive

City Dayton State OH Zip Code 45419-1722

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

Name of Employer Self Occupation Writer/Editor, Substitute Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2015  
**Transaction ID : SA11AI.4236**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. James Guilfoyle**

Mailing Address 455 Ridgewood Ave

City Dayton State OH Zip Code 45409

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

Name of Employer N/A Occupation Student

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 21.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2015  
**Transaction ID : SA11AI.4241**

Amount of Each Receipt this Period  
 21.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.00

**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 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**STUDENT DEBT REFORM PAC**

**A. Mr. Colin Mackintosh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 NORTH SHEFFIELD AVE SUITE 317  
 DEPAUL MAIL CENTER MLBX 258  
 City Chicago State IL Zip Code 60614-3219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Barbour Occupation Sales Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7.95

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 21 / 2015  
**Transaction ID : SA11AI.4244**  
 Amount of Each Receipt this Period  
 7.95

**B. Mr. Colin Mackintosh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 NORTH SHEFFIELD AVE SUITE 317  
 DEPAUL MAIL CENTER MLBX 258  
 City Chicago State IL Zip Code 60614-3219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Barbour Occupation Sales Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 39.95

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2015  
**Transaction ID : SA11AI.4242**  
 Amount of Each Receipt this Period  
 32.00

**C. Mr. Colin Mackintosh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 NORTH SHEFFIELD AVE SUITE 317  
 DEPAUL MAIL CENTER MLBX 258  
 City Chicago State IL Zip Code 60614-3219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Barbour Occupation Sales Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 40.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2015  
**Transaction ID : SA11AI.4243**  
 Amount of Each Receipt this Period  
 0.49

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.44
<b>TOTAL</b> 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 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STUDENT DEBT REFORM PAC**

**A. Dr. Catherine May**  
Full Name (Last, First, Middle Initial)

Mailing Address 4918 N Janssen Avenue

City Chicago State IL Zip Code 60640

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

Name of Employer DePaul University Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2015  
**Transaction ID : SA11AI.4238**

Amount of Each Receipt this Period  
 200.00

**B. Mr. Roberto Robaina**  
Full Name (Last, First, Middle Initial)

Mailing Address 1336 N Claremont Avenue

City Chicago State IL Zip Code 60622

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

Name of Employer DePaul University Occupation Student

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2015  
**Transaction ID : SA11AI.4237**

Amount of Each Receipt this Period  
 20.00

**C. Mr. Roberto Robaina**  
Full Name (Last, First, Middle Initial)

Mailing Address 1336 N Claremont Avenue

City Chicago State IL Zip Code 60622

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

Name of Employer DePaul University Occupation Student

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 41.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2015  
**Transaction ID : SA11AI.4240**

Amount of Each Receipt this Period  
 21.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00

**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 9 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**STUDENT DEBT REFORM PAC**

**A. Zach Stevens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28580 Wexford  
 City Warren State MI Zip Code 48092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Student Occupation N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 9.99

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2015  
**Transaction ID : SA11AI.4239**  
 Amount of Each Receipt this Period  
 9.99

**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  
 M M / D D / Y Y Y Y Y Y  
 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  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.99
<b>TOTAL</b> This Period (last page this line number only).....▶	372.43