

# 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.   
MMC CORP POLITICAL ACTION COMMITTEE

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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  /  /  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. David Cimpl

Signature of Treasurer Mr. David Cimpl [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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MMC CORP POLITICAL ACTION COMMITTEE**

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="2014"/>	<input type="text" value="9784.00"/>	<input type="text" value="9784.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9784.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6139.00"/>	<input type="text" value="6139.00"/>
(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="15923.00"/>	<input type="text" value="15923.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8500.00"/>	<input type="text" value="8500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7423.00"/>	<input type="text" value="7423.00"/>
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

MMC CORP POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2014 To: 03 / 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).....	3050.00	3050.00
(ii) Unitemized .....	3089.00	3089.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6139.00	6139.00
(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) .....	6139.00	6139.00
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.).....	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))..... ▶	6139.00	6139.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6139.00	6139.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	8500.00
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)) ..	8500.00	8500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8500.00	8500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	6139.00	6139.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6139.00	6139.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

**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 6 OF 10
<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)  
**MMC CORP POLITICAL ACTION COMMITTEE**

**A. Robin Broder**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6108 N.W. 103rd St.  
City Kansas City State MO Zip Code 64154  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MMC Corp Occupation VP of Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : SA11AI.6164**  
Amount of Each Receipt this Period 450.00  
\$50 Bi/Weekly Starting 1/31/14

**B. Mr. David Cimpl**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10955 Lowell Ave. #350  
City Overland Park State KS Zip Code 66210-2408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MMC Corp Occupation C.F.O.  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : SA11AI.6163**  
Amount of Each Receipt this Period 650.00  
\$50 Bi/Weekly Starting 1/3/14

**C. Mr. John Duncan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 55 Egbert Street  
City Bay Head State NJ Zip Code 08742  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MMC Contractors Northeast Occupation Estimating Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : SA11AI.6152**  
Amount of Each Receipt this Period 300.00  
\$25 Bi/Weekly Starting 1/8/14

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<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 7 OF 10
	<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)  
**MMC CORP POLITICAL ACTION COMMITTEE**

**A. Jason Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 808 Masters Dr.

City Oceanside State CA Zip Code 92057

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

Name of Employer Countrywide Mechanical Occupation Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 15 / 2014  
**Transaction ID : SA11AI.6144**

Amount of Each Receipt this Period  
 250.00

Contribution

**B. Mr. Peter Kelley**  
Full Name (Last, First, Middle Initial)

Mailing Address 6753 Vahalla Court

City Shawnee State KS Zip Code 66217

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

Name of Employer MW Builders Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : SA11AI.6202**

Amount of Each Receipt this Period  
 350.00

\$35 Bi/Weekly Starting 1/3/14

**C. Mr. Jason Oldham**  
Full Name (Last, First, Middle Initial)

Mailing Address 53 Bluebonnett Drive

City Belton State TX Zip Code 76513

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

Name of Employer MW Builders Occupation Operations Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : SA11AI.6200**

Amount of Each Receipt this Period  
 450.00

\$50 Bi/Weekly Starting 1/3/14

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<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: PAGE 8 OF 10  
(check only one)

<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
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NAME OF COMMITTEE (In Full)  
**MMC CORP POLITICAL ACTION COMMITTEE**

**A. Mr. Thomas Powers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 14 Eastmans Road  
City Parsippany State NJ Zip Code 07054  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MMC Contractors Northeast Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : SA11A1.6151**  
Amount of Each Receipt this Period 600.00  
\$50 Bi/Weekly Starting 1/8/14 via payroll deduction

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3050.00



**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

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NAME OF COMMITTEE (In Full)  
**MMC CORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CROWLEY FOR CONGRESS**

Mailing Address 84-56 GRAND AVENUE

City State Zip Code  
ELMHURST NY 11373

Purpose of Disbursement  
Contribution

Candidate Name  
**JOSEPH CROWLEY**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NY District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : **SB23.6211**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ERIK PAULSEN**

Mailing Address P.O. BOX 44369  
250 PRAIRIE CENTER DRIVE

City State Zip Code  
EDEN PRAIRIE MN 55344

Purpose of Disbursement  
Contribution

Candidate Name  
**ERIK PAULSEN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

Transaction ID : **SB23.6147**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF SCHUMER**

Mailing Address 192 LEXINGTON AVENUE SUITE 1001

City State Zip Code  
NEW YORK NY 10016

Purpose of Disbursement  
Contribution

Candidate Name  
**CHARLES E SCHUMER**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NY District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

Transaction ID : **SB23.6146**

Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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

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NAME OF COMMITTEE (In Full)  
**MMC CORP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICHARD E NEAL FOR CONGRESS COMMITTEE**

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD State MA Zip Code 01108

Purpose of Disbursement  
Contribution

Candidate Name  
**RICHARD E MR. NEAL**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  
 Other (specify) ▼  
State: MA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

**Transaction ID : SB23.6148**

Amount of Each Disbursement this Period

2000.00
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Full Name (Last, First, Middle Initial)

**B. STABENOW FOR US SENATE**

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement  
Contribution

Candidate Name  
**DEBBIE STABENOW**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  
 Other (specify) ▼  
State: MI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

**Transaction ID : SB23.6149**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. TOM REED FOR CONGRESS**

Mailing Address PO BOX 391

City GENEVA State NY Zip Code 14456

Purpose of Disbursement  
Contribution

Candidate Name  
**THOMAS W II REED**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  
 Other (specify) ▼  
State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

**Transaction ID : SB23.6213**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4000.00
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**TOTAL** This Period (last page this line number only)..... ▶

8500.00
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