

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

BEST PAC

ADDRESS (number and street)

651 JEANNY MARIE CT

☐Check if different  
than previously  
reported. (ACC)

EL PASO

TX

79932

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00432724

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  
Quarterly 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 (12G)

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

01

01

2009

through

06

30

2009

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

Willie Cintron

Signature of Treasurer

Electronically Filed by Willie Cintron

Date

07

30

2009

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)

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Write or Type Committee Name  
BEST PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		5861.52
(b) Cash on Hand at Beginning of Reporting Period .....	5861.52	
(c) Total Receipts (from Line 19) .....	7000.00	7000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	12861.52	12861.52
7. Total Disbursements (from Line 31) .....	12456.18	12456.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	405.34	405.34
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	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

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
BEST PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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) .....	4500.00	4500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4500.00	4500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	7000.00	7000.00
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 Transfer (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)) .....	7000.00	7000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7000.00	7000.00

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared 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.....	12456.18	12456.18	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	12456.18	12456.18	
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 Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	12456.18	12456.18	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12456.18	12456.18	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	7000.00	7000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7000.00	7000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12456.18	12456.18
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12456.18	12456.18

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

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

FOR LINE NUMBER: PAGE 6 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

BEST PAC

**A.**

Full Name (Last, First, Middle Initial)

David Austin

Mailing Address 310 N. Mesa  
Suite 524

City State Zip Code  
El Paso TX 79901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Austin, Copelin & Reyes

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.4107

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

W. John Nichols

Mailing Address 8204 Roseland Drive

City State Zip Code  
Fairfax Station VA 22039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Potomac Advocates

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.4102

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Andrew N. Romanyk

Mailing Address 6632 Whispering Woods

City State Zip Code  
Plano TX 75204

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Romanyck Consulting

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.4100

Amount of Each Receipt this Period

1000.00

Contribution

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

4500.00

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

4500.00

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

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

FOR LINE NUMBER: PAGE 7 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

BEST PAC

**A.**

Full Name (Last, First, Middle Initial)

ELBIT SYSTEMS OF AMERICA LLC POLITICAL ACTION COMMITTEE

Mailing Address 4700 Marine Creek Parkway

City

Fort Worth

State

TX

Zip Code

76179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 7 / 2 0 0 9

Transaction ID: SA11C.4109

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 3699 WILSHIRE BLVD., #1290

City

LOS ANGELES

State

CA

Zip Code

90010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 9

Transaction ID: SA11C.4113

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)

Mailing Address 2941 Fairview Park Dr.  
Suite 100

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 3 / 2 0 0 9

Transaction ID: SA11C.4111

Amount of Each Receipt this Period

1000.00

Contribution

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

2500.00

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

2500.00

# **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)

PAGE 8 / 12

<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

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NAME OF COMMITTEE (In Full)  
BEST PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Black El Paso Democrats	<b>Transaction ID:</b> SB21B.4148 <b>Date of Disbursement</b>																				
Mailing Address 2829 Montana Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	0	9												
City El Paso State TX Zip Code 79902	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Awards Banquet Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Willie Cintron	<b>Transaction ID:</b> SB21B.4118 <b>Date of Disbursement</b>																				
Mailing Address 651 Jeanny Marie Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	0	9												
City El Paso State TX Zip Code 79932	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fees Candidate Name	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Willie Cintron	<b>Transaction ID:</b> SB21B.4129 <b>Date of Disbursement</b>																				
Mailing Address 651 Jeanny Marie Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	0		2	0	0	9												
City El Paso State TX Zip Code 79932	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fees Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

**3500.00**

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 12

<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

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NAME OF COMMITTEE (In Full)  
BEST PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Gabrielle Guevara</p> <p>Mailing Address 1016 S. Wayne Street #603</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4128</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4000.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Gabrielle Guevara</p> <p>Mailing Address 1016 S. Wayne Street #603</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4126</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Tejano Democrats</p> <p>Mailing Address 3000 E. Yandell</p> <p>City El Paso State TX Zip Code 79903</p> <p>Purpose of Disbursement Honor Dinner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4150</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

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

**6500.00**

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<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

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NAME OF COMMITTEE (In Full)  
BEST PAC

<b>A.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B.4147 <b>Date of Disbursement</b>
Mailing Address Lockbox 577	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 1 / 2 0 0 9</div> </div>
City Carol Stream State IL Zip Code 60132 Purpose of Disbursement Shipping Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>167.30</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB21B.4138 <b>Date of Disbursement</b>
Mailing Address Lockbox 577	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 9</div> </div>
City Carol Stream State IL Zip Code 60132 Purpose of Disbursement Shipping Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>132.79</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) USO El Paso	<b>Transaction ID:</b> SB21B.4152 <b>Date of Disbursement</b>
Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 0 9</div> </div>
City El Paso State TX Zip Code 79901 Purpose of Disbursement Tournament Fund Raiser Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

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

**800.09**

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<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

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NAME OF COMMITTEE (In Full)  
BEST PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> SB21B.4124 <b>Date of Disbursement</b>
Mailing Address P.O. Box 96088	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 7 / 2 0 0 9</div> </div>
City Bellevue State WA Zip Code 98009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Phone Services Candidate Name	<div> <div>235.95</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> SB21B.4133 <b>Date of Disbursement</b>
Mailing Address P.O. Box 96088	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 4 / 2 0 0 9</div> </div>
City Bellevue State WA Zip Code 98009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Phone Services Candidate Name	<div> <div>231.92</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> SB21B.4142 <b>Date of Disbursement</b>
Mailing Address P.O. Box 96088	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 9</div> </div>
City Bellevue State WA Zip Code 98009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Phone Services Candidate Name	<div> <div>206.42</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**674.29**

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 12

<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

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NAME OF COMMITTEE (In Full)  
BEST PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 96088	<b>Transaction ID:</b> SB21B.4143 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	4		2	0	9		
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	4		2	0	9														
City Bellevue State WA Zip Code 98009 Purpose of Disbursement Phone Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>202.67</td> </tr> </table>	202.67																				
202.67																						
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 96088 City Bellevue State WA Zip Code 98009 Purpose of Disbursement Phone Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4144 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>201.25</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	9		201.25
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	5		2	0	9														
201.25																						
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 96088 City Bellevue State WA Zip Code 98009 Purpose of Disbursement Phone Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4146 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>211.26</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	0		2	0	9		211.26
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	0		2	0	9														
211.26																						

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

**615.18**

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

**12089.56**