



A. Form/Schedule : **F3XN**

Transaction ID :

This report contains two transactions with memo text. (1) An IE was made on 5/19 and reported on 5/20 in the amount of \$1,992.42. The vendor for this IE charged \$2,500 in advance, but the IE ended up only costing \$1,992.42. The balance of the initial charge is being refunded in (and will be reported in) the next reporting period. (2) A roundtrip airport shuttle reservation for \$90.50 that was prepaid was cancelled with a full refund. However, the vendor issued the refund in 2 separate transactions (\$40.25 and \$50.25), representing each one-way leg of the roundtrip purchase. Each refund transaction was reported separately (each with memo text).

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
One Nation PAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		11638.40
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	41621.35									
(c) Total Receipts (from Line 19) .....	15998.61	148915.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57619.96	160554.20								
7. Total Disbursements (from Line 31) .....	22581.02	125515.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	35038.94	35038.94								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
One Nation PAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	2080.00	27691.00
(ii) Unitemized .....	13828.11	115434.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	15908.11	143125.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	100.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	15908.11	143225.30
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) .....	90.50	3090.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	2600.00
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)) .....	15998.61	148915.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15998.61	148915.80

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	18081.02	100588.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	18081.02	100588.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	14800.00
24. Independent Expenditure (use Schedule E) .....	2500.00	2500.00
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	4626.75
(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	4626.75
29. Other Disbursements.....	0.00	3000.00
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))..	22581.02	125515.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22581.02	125515.26

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 25

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 .....	15908.11	143225.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	4626.75
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15908.11	138598.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18081.02	100588.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	90.50	3090.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17990.52	97498.01

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 25  
(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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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)  
One Nation PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ernest Aldredge

Mailing Address 7661 E. Whispering Wind Dr.

City State Zip Code  
Scottsdale AZ 85255

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

Name of Employer Occupation  
A & A retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2010

**Transaction ID:** SA11AI.11601

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Jo Ann Baughman

Mailing Address PO Box 1269

City State Zip Code  
Philomath OR 97370

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

Name of Employer Occupation  
retired farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 369.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** SA11AI.11824

Amount of Each Receipt this Period  
52.00

**C.**

Full Name (Last, First, Middle Initial)  
Jo Ann Baughman

Mailing Address PO Box 1269

City State Zip Code  
Philomath OR 97370

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

Name of Employer Occupation  
retired farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 417.00

Date of Receipt  
MM / DD / YYYY  
05 / 20 / 2010

**Transaction ID:** SA11AI.11823

Amount of Each Receipt this Period  
48.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **125.00**

**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: PAGE 8 / 25  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
One Nation PAC

**A.** Full Name (Last, First, Middle Initial)  
Norman Blake

Mailing Address 11179 Estancia Way

City State Zip Code  
Carmel IN 46032

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY  
05 / 03 / 2010

**Transaction ID:** SA11AI.11361

Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Andrew Borom

Mailing Address 4492 Rhoden Cove Lane

City State Zip Code  
Tallahassee FL 32312

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Tallahassee Orthopedic Clinic Orthopedic Surgeon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt MM / DD / YYYY  
05 / 11 / 2010

**Transaction ID:** SA11AI.11271

Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Donald Bosse

Mailing Address 30850 Palm Drive

City State Zip Code  
Big Pine Key FL 33043

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Bardon Light & Sound Electrical Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY  
05 / 17 / 2010

**Transaction ID:** SA11AI.11284

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... 300.00

**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 / 25
	<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)  
One Nation PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jack Buzbee		Date of Receipt
	Mailing Address 200 E Douglas St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 03 / 2010
	City	State	Zip Code
	De Soto	IL	62924
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.11441
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 35.00
		<input type="text"/> 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jack Buzbee		Date of Receipt
	Mailing Address 200 E Douglas St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 11 / 2010
	City	State	Zip Code
	De Soto	IL	62924
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.11440
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 375.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jack Buzbee		Date of Receipt
	Mailing Address 200 E Douglas St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 22 / 2010
	City	State	Zip Code
	De Soto	IL	62924
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.11439
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 85.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 10 / 25
	<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)  
One Nation PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth Coleman

Mailing Address 836 Greenthorne Blvd

City State Zip Code  
Schenectady NY 12303

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

Name of Employer  
Cardiology Associates of Schenectady

Occupation  
Cardiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2010

**Transaction ID:** SA11AI.11136

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Laura D'Auri

Mailing Address PO Box 3213

City State Zip Code  
Culver City CA 90231

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

Name of Employer  
self

Occupation  
lawyer/commercial landlord

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2010

**Transaction ID:** SA11AI.11638

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
George Fernsler

Mailing Address 36 Ellwood St.  
Apt. F6

City State Zip Code  
New York NY 10040

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

Name of Employer  
Broadridge Financial

Occupation  
Programmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
185.00

Date of Receipt  
MM / DD / YYYY  
05 / 16 / 2010

**Transaction ID:** SA11AI.11875

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **315.00**

**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: PAGE 11 / 25

(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)  
One Nation PAC

**A.**

Full Name (Last, First, Middle Initial)  
John Haymaker

Mailing Address 3611 Ingomar Place, NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Occupation  
CPA Owner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.11169

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Hughes

Mailing Address 2005 Fern Hill Ct.

City State Zip Code  
Henderson NV 89052

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

Name of Employer Occupation  
Glass Supply Inc. Owner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.11626

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
John Kleinhammer

Mailing Address 1000 Park Avenue

City State Zip Code  
Cayucos CA 93430

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

Name of Employer Occupation  
self inventor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.11738

Amount of Each Receipt this Period

50.00

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

400.00

**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:	PAGE 12 / 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
One Nation PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) John Kleinhammer		Date of Receipt
	Mailing Address 1000 Park Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 21 / 2010
	City	State	Zip Code
	Cayucos	CA	93430
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.11737
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		inventor	<input type="text"/> 50.00
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 575.00	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Floyd Lathbury		Date of Receipt
	Mailing Address 16 Cambridge Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 11 / 2010
	City	State	Zip Code
	Rome	GA	30161
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.11248
Name of Employer retired		Occupation	Amount of Each Receipt this Period
retired		retired	<input type="text"/> 50.00
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 350.00	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Geoffrey Mitchell		Date of Receipt
	Mailing Address 10 Dearborn Brook Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 17 / 2010
	City	State	Zip Code
	Exeter	NH	03833
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.11093
Name of Employer Brant Energy Inc.		Occupation	Amount of Each Receipt this Period
Brant Energy Inc.		Consultant	<input type="text"/> 25.00
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 275.00	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 125.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 / 25  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
One Nation PAC

**A.** Full Name (Last, First, Middle Initial)  
James Nickel  
Mailing Address P.O. Box 60679

City State Zip Code  
Bakersfield CA 93386

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

Name of Employer Occupation  
Nickel Family Farms, LLC Owner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2010  
Transaction ID: SA11AI.11733  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Nicola Opdycke  
Mailing Address 218 Prairie Smoke Circle

City State Zip Code  
Whitefish MT 59937

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

Name of Employer Occupation  
self retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2010  
Transaction ID: SA11AI.11407  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
William Ritchie  
Mailing Address 5302 Brookeway Dr

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
retired n/a

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2010  
Transaction ID: SA11AI.11178  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00

**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: PAGE 14 / 25  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
One Nation PAC

**A.** Full Name (Last, First, Middle Initial)  
William Ritchie  
 Mailing Address 5302 Brookeway Dr  
 City State Zip Code  
Bethesda MD 20816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation n/a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00  
 Date of Receipt 05 / 22 / 2010  
**Transaction ID:** SA11AI.11176  
 Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
William Ritchie  
 Mailing Address 5302 Brookeway Dr  
 City State Zip Code  
Bethesda MD 20816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation n/a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00  
 Date of Receipt 05 / 22 / 2010  
**Transaction ID:** SA11AI.11177  
 Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Ronald Sarson  
 Mailing Address 3017 Leefield Drive  
 City State Zip Code  
Herndon VA 20171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00  
 Date of Receipt 05 / 20 / 2010  
**Transaction ID:** SA11AI.11172  
 Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 165.00  
**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: PAGE 15 / 25

(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)  
One Nation PAC

**A.**

Full Name (Last, First, Middle Initial)  
Janis Weidner

Mailing Address 5458 Dayna Court

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Self Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.11451

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Don Williams

Mailing Address 1615 Eve Drive

City State Zip Code  
Concord CA 94521

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

Name of Employer City of El Cerrito Ca. Occupation Retired Firefighter

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.11754

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)  
Carol Wilson

Mailing Address 2197 Sutter View Land

City State Zip Code  
Lincoln CA 95648

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

Name of Employer Retired Occupation none

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.11787

Amount of Each Receipt this Period

100.00

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

365.00

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

2080.00

**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 16 / 25

<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)  
One Nation PAC

A.	Full Name (Last, First, Middle Initial) BestDecal.com	Transaction ID: SB21B.11915 Date of Disbursement 05 / 26 / 2010
	Mailing Address 1036 W. 23rd Street	Amount of Each Disbursement this Period 539.99
	City Tempe State AZ Zip Code 85282	
	Purpose of Disbursement Bumper Stickers	003 Category/ Type
	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.	Full Name (Last, First, Middle Initial) BestDecal.com	Transaction ID: SB21B.11916 Date of Disbursement 05 / 27 / 2010
	Mailing Address 1036 W. 23rd Street	Amount of Each Disbursement this Period 81.30
	City Tempe State AZ Zip Code 85282	
	Purpose of Disbursement Vehicle Magnets	003 Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Courtyard by Marriott Waikiki Beach	Transaction ID: SB21B.11919 Date of Disbursement 05 / 16 / 2010
	Mailing Address 400 Royal Hawaiian Avenue	Amount of Each Disbursement this Period 335.44
	City Honolulu State HI Zip Code 96815	
	Purpose of Disbursement PAC Lodging	002 Category/ Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	956.73
<b>TOTAL</b> 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 17 / 25

<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)  
One Nation PAC

A.	Full Name (Last, First, Middle Initial) Eusatrix Corporation	Transaction ID: SB21B.11926 Date of Disbursement
	Mailing Address 1808 Q Street Suite C	<input type="text" value="05"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Sacramento State CA Zip Code 95811	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Office Rent (3 months) Candidate Name	<input type="text" value="2184.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Eusatrix Corporation	Transaction ID: SB21B.11927 Date of Disbursement
	Mailing Address 1808 Q Street Suite C	<input type="text" value="05"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Sacramento State CA Zip Code 95811	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Management Consulting Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Eusatrix Corporation	Transaction ID: SB21B.11928 Date of Disbursement
	Mailing Address 1808 Q Street Suite C	<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Sacramento State CA Zip Code 95811	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Management Consulting Candidate Name	<input type="text" value="3000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7184.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 18 / 25

<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)  
One Nation PAC

A.

Full Name (Last, First, Middle Initial)  
Mr. Kelly S Eustis

Transaction ID: SB21B.11943  
Date of Disbursement

Mailing Address PO BOX 614

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	0

City Sacramento State CA Zip Code 95812

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC Fundraising Commission (4/24/10 to 4/30/10)

003
Category/ Type

1129.65
---------

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)  
Mr. Kelly S Eustis

Transaction ID: SB21B.11944  
Date of Disbursement

Mailing Address PO BOX 614

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	0

City Sacramento State CA Zip Code 95812

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC Fundraising Commission (5/01/10 to 5/21/10)

003
Category/ Type

1765.97
---------

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)  
Facebook, Inc.

Transaction ID: SB21B.11933  
Date of Disbursement

Mailing Address 1601 S. California Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	0

City Palo Alto State CA Zip Code 94304

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC Advertising

004
Category/ Type

60.00
-------

Candidate Name

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

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

2955.62
---------

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)

PAGE 19 / 25

<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)  
One Nation PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Facebook, Inc.</p> <p>Mailing Address 1601 S. California Avenue</p> <p>City Palo Alto State CA Zip Code 94304</p> <p>Purpose of Disbursement PAC Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.11934 <b>Date of Disbursement</b> 05 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 60.00</p> <p>Category/Type 004</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hawaiian Airlines</p> <p>Mailing Address P.O. Box 30008</p> <p>City Honolulu State HI Zip Code 96820</p> <p>Purpose of Disbursement PAC Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.11938 <b>Date of Disbursement</b> 05 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1203.28</p> <p>Category/Type 002</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Hoefler &amp; Frere-Jones</p> <p>Mailing Address 611 Broadway Room 728</p> <p>City New York State NY Zip Code 10012</p> <p>Purpose of Disbursement Typeface Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.11939 <b>Date of Disbursement</b> 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 278.00</p> <p>Category/Type 001</p>

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

1541.28

**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)

<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)  
One Nation PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hyatt Regency Sacramento</p> <p>Mailing Address 1209 L Street</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement PAC Meeting Expenses</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.11942</p> <p>Date of Disbursement 05 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 214.44</p> <p>002 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) iContribute LLC</p> <p>Mailing Address 707 8th Street Suite 200</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement iContribute transaction processing fees for May</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.11954</p> <p>Date of Disbursement 05 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1091.52</p> <p>003 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Deborah Johns</p> <p>Mailing Address 2235 Banbury Circle</p> <p>City Roseville State CA Zip Code 95661</p> <p>Purpose of Disbursement Consulting Services</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.11922</p> <p>Date of Disbursement 05 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>001 Category/Type</p>

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

3305.96

**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)

<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)  
One Nation PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Deborah Johns</p> <p>Mailing Address 2235 Banbury Circle</p> <p>City Roseville State CA Zip Code 95661</p> <p>Purpose of Disbursement Travel Expense Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.11923</p> <p>Date of Disbursement 05 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 124.47</p> <p>002 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MailChimp c/o The Rocket Science Group</p> <p>Mailing Address 512 Means Street Suite 404</p> <p>City Atlanta State GA Zip Code 30318</p> <p>Purpose of Disbursement PAC Email Marketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.11945</p> <p>Date of Disbursement 05 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 204.00</p> <p>004 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) National Car Rental</p> <p>Mailing Address 2912 Aolele Street</p> <p>City Honolulu State HI Zip Code 96819</p> <p>Purpose of Disbursement PAC Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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.11947</p> <p>Date of Disbursement 05 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 360.67</p> <p>002 Category/ Type</p>

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

689.14

**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 22 / 25

<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)  
One Nation PAC

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.11950 Date of Disbursement																			
	Mailing Address P.O. Box 36647	<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>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	6		2	0	1	0												
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Travel Candidate Name	<table border="1"><tr><td>20.00</td></tr></table>	20.00																		
20.00																					
	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) ▼																			
		<table border="1"><tr><td>002</td></tr></table> Category/ Type	002																		
002																					

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.11951 Date of Disbursement																			
	Mailing Address P.O. Box 36647	<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>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	7		2	0	1	0												
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Travel Candidate Name	<table border="1"><tr><td>738.80</td></tr></table>	738.80																		
738.80																					
	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) ▼																			
		<table border="1"><tr><td>002</td></tr></table> Category/ Type	002																		
002																					

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.11952 Date of Disbursement																			
	Mailing Address P.O. Box 36647	<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>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	7		2	0	1	0												
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Travel Candidate Name	<table border="1"><tr><td>70.00</td></tr></table>	70.00																		
70.00																					
	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) ▼																			
		<table border="1"><tr><td>002</td></tr></table> Category/ Type	002																		
002																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>828.80</td></tr></table>	828.80
828.80		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>17461.53</td></tr></table>	17461.53
17461.53		



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

NAME OF COMMITTEE (In Full) One Nation PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00468447	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Intermarkets, Inc.		Date M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
Mailing Address 344 Maple Avenue, W #318		Amount 2500.00	
City State Zip Code Vienna VA 22180		Transaction ID: SE.11074	
Purpose of Expenditure Website advertising		Office Sought: <input checked="" type="checkbox"/> House State: HI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: CHARLES KONG DJOU		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010	
Calendar Year-To-Date Per Election for Office Sought		2500.00	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2500.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	2500.00
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.	
Mr. Dan Backer, Esq. Signature	Date M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 0

A. Form/Schedule : **SE**

Transaction ID : **SE.11074**

Actual amount of this independent expenditure was \$1992.42, as reported on our 24 hour notice. \$2,500 was initially charged to the PAC credit card for the planned transaction, but the transaction was reduced in size during the course of the expenditure (advertising buy), so that only \$1992.42 was spent. A refund of the remaining \$507.58 is pending from the vendor and will be reported in the subsequent reporting period. This transaction was discussed with FEC analyst Ashley Carter (the primary FEC analyst was not available) to insure proper compliance and reporting.