

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

JEFF PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="41878.78"/>	<input type="text" value="41878.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31245.62"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="39855.02"/>	<input type="text" value="159298.06"/>
(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="71100.64"/>	<input type="text" value="201176.84"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="166.11"/>	<input type="text" value="130242.31"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="70934.53"/>	<input type="text" value="70934.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1500.00"/>	

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)

Write or Type Committee Name

JEFF PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 27 / 2012 To: M M / D D / Y Y Y Y 12 / 31 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	54000.00
(ii) Unitemized	0.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	54010.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	22000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	76010.00
12. Transfers From Affiliated/Other Party Committees.....	39855.02	81788.06
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	1500.00
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))..... ▶	39855.02	159298.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39855.02	159298.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	166.11	47683.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	166.11	47683.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	80000.00
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	2500.00
(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	2500.00
29. Other Disbursements	0.00	58.50
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)) ..	166.11	130242.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	166.11	130242.31

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	76010.00
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	73510.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	166.11	47683.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	166.11	47683.81

**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 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
JEFF PAC

A. DENHAM VICTORY FUND
Full Name (Last, First, Middle Initial)
Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO	State CA	Zip Code 95833
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00496018

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
81788.06

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2012

Transaction ID : INCA172

Amount of Each Receipt this Period
39855.02

TRANSFER FROM JOINT FUNDRAISER

B. FRED FAGUNDES
Full Name (Last, First, Middle Initial)
Mailing Address 11158 AVE. 24

City CHOWCHILLA	State CA	Zip Code 93610
--------------------	-------------	-------------------

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

Name of Employer FAGUNDES DAIRY	Occupation FARMER
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2012

Transaction ID : IDTA121

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

C. LLOYD FAGUNDES
Full Name (Last, First, Middle Initial)
Mailing Address 11158 AVE. 24

City CHOWCHILLA	State CA	Zip Code 93610
--------------------	-------------	-------------------

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

Name of Employer FAGUNDES DAIRY	Occupation FARMER
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2012

Transaction ID : IDTA122

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	39855.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
JEFF PAC

A. RALPH FAGUNDES
Full Name (Last, First, Middle Initial)

Mailing Address 11158 AVE. 24

City CHOWCHILLA	State CA	Zip Code 93610
--------------------	-------------	-------------------

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

Name of Employer FAGUNDES DAIRY	Occupation FARMER
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2012

Transaction ID : IDTA124

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

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

Mailing Address 11158 AVE. 24

City CHOWCHILLA	State CA	Zip Code 93610
--------------------	-------------	-------------------

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

Name of Employer FAGUNDES DAIRY	Occupation FARMER
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2012

Transaction ID : IDTA123

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

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

Mailing Address 24093 AMERICAN AVE.

City HILMAR	State CA	Zip Code 95324
----------------	-------------	-------------------

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

Name of Employer AHLEM FARMS PARTNERSHIP	Occupation FARMER
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2012

Transaction ID : IDTA125

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 8 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
JEFF PAC

A. JANICE CAPRARA
Full Name (Last, First, Middle Initial)
Mailing Address 28789 EL CAMINO REAL NORTH

City GONZALES	State CA	Zip Code 93928
------------------	-------------	-------------------

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

Name of Employer R. C. PACKING LLC	Occupation FARMER
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : IDTA126

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

B. TOM BENGARD
Full Name (Last, First, Middle Initial)
Mailing Address 379 W. MARKET ST.

City SALINAS	State CA	Zip Code 93901
-----------------	-------------	-------------------

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

Name of Employer TOM BENGARD RANCH	Occupation FARMER
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : IDTA127

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]

C. NICK OH
Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 6248

City SALINAS	State CA	Zip Code 93912
-----------------	-------------	-------------------

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

Name of Employer CALPRO	Occupation OWNER
----------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : IDTA128

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
JEFF PAC

Full Name (Last, First, Middle Initial) A. DONALD NIELSEN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012
Mailing Address 107 GEIL ST.		Transaction ID : IDTA129
City SALINAS State CA Zip Code 93901	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer NIELSEN TRUCKING Occupation OWNER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. RONI ROBERTS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012
Mailing Address 895 POPPY CT.		Transaction ID : IDTA130
City OAKDALE State CA Zip Code 95361	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer N/A Occupation NOT EMPLOYED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. SHAY ROBERTS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2012
Mailing Address 895 POPPY CT.		Transaction ID : IDTA131
City OAKDALE State CA Zip Code 95361	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
Name of Employer N/A Occupation NOT EMPLOYED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 10 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
JEFF PAC

A. STEVE SCARONI
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 268

City HEBER State CA Zip Code 92249

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

Name of Employer VALLEY HARVESTING & PACKING Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 05 / 2012

Transaction ID : IDTA133

Amount of Each Receipt this Period 1000.00

[MEMO ITEM]

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

Mailing Address 1840 N. OLIVE #4

City TURLOCK State CA Zip Code 95382

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

Name of Employer SELF Occupation DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2012

Transaction ID : IDTA132

Amount of Each Receipt this Period 500.00

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	39855.02

**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

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)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. CHASE CARDMEMBER SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2012

Mailing Address P. O. BOX 94014

Transaction ID : EXPB174

City PALATINE State IL Zip Code 60094

Amount of Each Disbursement this Period

138.12

Purpose of Disbursement
CREDIT CARD PAYMENT

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

138.12

138.12

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
JEFF PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCONZA CANDY CO.	Nature of Debt (Purpose): CANDY
Mailing Address 1 SCONZA CANDY LN.	
City State Zip Code OAKDALE CA 95361	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD178	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	1500.00
2) TOTALS This Period (last page this line number only)..... ▶	1500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	1500.00