

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

MMC CORP POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 10955 LOWELL AVE #350

Check if different than previously reported. (ACC) OVERLAND PARK KS 66210

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

C C00509356

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day **PRE-Election** Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day **POST-Election** Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2013 through [MM] / [DD] / [YYYY] 03 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. David Cimpl

Signature of Treasurer *Mr. David Cimpl* [Electronically Filed] Date 04 / 15 / 2013

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								
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MMC CORP POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="5988.00"/>	<input type="text" value="5988.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5988.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7857.00"/>	<input type="text" value="7857.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="13845.00"/>	<input type="text" value="13845.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10000.00"/>	<input type="text" value="10000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3845.00"/>	<input type="text" value="3845.00"/>
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="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)

Write or Type Committee Name

MMC CORP POLITICAL ACTION COMMITTEE

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

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).....	5850.00	5850.00
(ii) Unitemized	2007.00	2007.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7857.00	7857.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7857.00	7857.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7857.00	7857.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7857.00	7857.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10000.00	10000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	10000.00

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)	7857.00	7857.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7857.00	7857.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Mr. David Cimpl
Full Name (Last, First, Middle Initial)

Mailing Address 10955 Lowell Ave.
#350

City Overland Park State KS Zip Code 66210-2408

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

Name of Employer MMC Corp Occupation C.F.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
03 / 29 / 2013
Transaction ID : SA11AI.5936

Amount of Each Receipt this Period
550.00

\$50/biweekly starting 01/18/13

B. Mr. John Duncan
Full Name (Last, First, Middle Initial)

Mailing Address 55 Egbert Street

City Bay Head State NJ Zip Code 08742

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

Name of Employer MMC Contractors Northeast Occupation Estimating Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 27 / 2013
Transaction ID : SA11AI.5916

Amount of Each Receipt this Period
250.00

\$25/biweekly starting 01/23/13

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

Mailing Address 808 Masters Dr.

City Oceanside State CA Zip Code 92057

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

Name of Employer Countrywide Mechanical Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 04 / 2013
Transaction ID : SA11AI.5975

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5936

payroll deduction

Form/Schedule: SA11AI

Transaction ID: SA11AI.5916

payroll deduction

**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 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mr. Peter Kelley		Date of Receipt MM / DD / YYYY 03 / 29 / 2013 Transaction ID : SA11AI.5950
Mailing Address 6753 Vahalla Court		Amount of Each Receipt this Period 550.00
City Shawnee	State KS	Zip Code 66217
FEC ID number of contributing federal political committee.	C	
Name of Employer MW Builders	Occupation President	\$50/biweekly starting 01/18/13
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Jeremy Lambden		Date of Receipt MM / DD / YYYY 02 / 19 / 2013 Transaction ID : SA11AI.5977
Mailing Address		Amount of Each Receipt this Period 1000.00
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mr. William McDermott		Date of Receipt MM / DD / YYYY 03 / 29 / 2013 Transaction ID : SA11AI.5937
Mailing Address 20330 W. 94th Terr.		Amount of Each Receipt this Period 550.00
City Lenexa	State KS	Zip Code 66220
FEC ID number of contributing federal political committee.	C	
Name of Employer MMC Corp	Occupation C.E.O.	\$50/biweekly starting 01/18/13
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5950

payroll deduction

Form/Schedule: SA11AI

Transaction ID: SA11AI.5937

payroll deduction

**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 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Dennis Miller

Mailing Address

City State Zip Code

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

Name of Employer: **MMC Contractors National** Occupation:

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt: **03 / 29 / 2013**

Transaction ID : SA11AI.5967

Amount of Each Receipt this Period: **225.00**

\$25/biweekly starting 02/01/13

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

Mailing Address **53 Bluebonnett Drive**

City **Belton** State **TX** Zip Code **76513**

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

Name of Employer: **MW Builders** Occupation: **Operations Manager**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt: **03 / 29 / 2013**

Transaction ID : SA11AI.5954

Amount of Each Receipt this Period: **550.00**

\$50/biweekly starting 01/18/13

Full Name (Last, First, Middle Initial)
C. Mr. Thomas Powers

Mailing Address **14 Eastmans Road**

City **Parsippany** State **NJ** Zip Code **07054**

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

Name of Employer: **MMC Contractors Northeast** Occupation: **President**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt: **03 / 29 / 2013**

Transaction ID : SA11AI.5925

Amount of Each Receipt this Period: **675.00**

\$75/biweekly starting 01/30/13

SUBTOTAL of Receipts This Page (optional)..... **1450.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5967

payroll deduction

Form/Schedule: SA11AI

Transaction ID: SA11AI.5954

payroll deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5925

payroll deduction

Form/Schedule:

Transaction ID:

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 13 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Mr. Thomas Sanders
Full Name (Last, First, Middle Initial)

Mailing Address 14117 Nicklaus Dr.

City Overland Park State KS Zip Code 66223

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

Name of Employer MMC Corp Occupation Board Consultant/Strategic Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2013
Transaction ID : SA11AI.5979

Amount of Each Receipt this Period
 500.00

Contribution

B. Mr. Steven Shahin
Full Name (Last, First, Middle Initial)

Mailing Address 725 Payne Ave.

City North Tonawanda State NY Zip Code 14120

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

Name of Employer MMC Corp Occupation Senior Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : SA11AI.5972

Amount of Each Receipt this Period
 500.00

Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	5850.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. BLUMENAUER FOR CONGRESS

Mailing Address 830 NE HOLLADAY, #105

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Contribution

Candidate Name
MMC CORP POLITICAL ACTION COMMITTEE

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

State: District:

Date of Disbursement

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

Transaction ID : **SB23.5912**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ERIK PAULSEN

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

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement
Campaign contribution

Candidate Name
Category/Type: **011**

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

State: MN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	3

Transaction ID : **SB23.5983**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SCHUMER

Mailing Address 192 LEXINGTON AVENUE SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement
Contribution

Candidate Name
MMC CORP POLITICAL ACTION COMMITTEE

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

State: District:

Date of Disbursement

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

Transaction ID : **SB23.5915**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

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

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

6	0	0	0	0	0	0	0	0	0

2	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. PORTMAN FOR SENATE COMMITTEE

Mailing Address 9856 ARCHER LANE

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement
Campaign contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 07 / 2013

Transaction ID : SB23.5984

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. RICHARD E NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD State MA Zip Code 01108

Purpose of Disbursement
Campaign contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 07 / 2013

Transaction ID : SB23.5986

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

4000.00

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

10000.00