

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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2004 OCT 18 A 10:21 Once Use Only

1. NAME OF COMMITTEE (In full) TYPE OR PRINT Example: If typing, type over the lines. NIXON, PEABODY LLP, FEDERAL PAC

ADDRESS (number and street) CLINTON SQUARE P.O. Box 31051 ROCHESTER NY 14603-1051

2. FEC IDENTIFICATION NUMBER 000404178 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Special, Runoff. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 29 2004 through 09 30 2004

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 Stephen B. Mullen

Signature of Treasurer [Signature] Date 10 18 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Nixon Peabody LLP Federal PAC

Report Covering the Period: From: 07 29 2004 To: 09 30 2004

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <u>2004</u> | | 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period | 0.00 | |
| (c) Total Receipts (from Line 18) | 0.00 | 0.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 0.00 | 0.00 |
| 7. Total Disbursements (from Line 31) | 0.00 | 0.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 0.00 | 0.00 |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | 0.00 | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Nixon Peabody LLP Federal PAC

Report Covering the Period:

From:

07/29/2004

To:

09/30/2004

| 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)..... | | |
| (ii) Unitemized..... | | |
| (iii) TOTAL (add | | |
| Lines 11(e)(i) and (ii).....▶ | | |
| (b) Political Party Committees..... | | |
| (c) Other Political Committees | | |
| (such as PACs)..... | | |
| (d) Total Contributions (add Lines | | |
| 11(a)(ii) (b), and (c)) (Carry | | |
| Totals to Line 39, page 5).....▶ | 0.00 | 0.00 |
| 12. Transfers From Affiliated/Other | | |
| Party Committees..... | | |
| 13. All Loans Received..... | | |
| 14. Loan Repayments Received..... | | |
| 15. Offsets To Operating Expenditures | | |
| (Refunds, Receipts, etc.) | | |
| (Carry Totals to Line 37, page 5)..... | | |
| 16. Refunds of Contributions Made | | |
| to Federal Candidates and Other | | |
| Political Committees..... | | |
| 17. Other Federal Receipts | | |
| (Dividends, Interest, etc.)..... | | |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account | | |
| (from Schedule H3)..... | | |
| (b) Levin Funds (from Schedule H5)..... | | |
| (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)).....▶ | 0.00 | 0.00 |
| 20. Total Federal Receipts | | |
| (subtract Line 18(c) from Line 19).....▶ | 0.00 | 0.00 |

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 | | |
| (ii) Non-Federal Share | | |
| (b) Other Federal Operating Expenditures | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 000 | 000 |
| 22. Transfers to Affiliated/Other Party | | |
| Committees | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | |
| 24. Independent Expenditures (see Schedule E) | | |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (see Schedule F) | | |
| 26. Loan Repayments Made | | |
| 27. Loans Made | | |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 000 | 000 |
| 29. Other Disbursements | | |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | | |
| (ii) "Levin" Share | | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 000 | 000 |
| 31. Total Disbursements (add Lines 21(c), 22, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 000 | 000 |
| 32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31) | 000 | 000 |

DETAILED SUMMARY PAGE
of Disbursements

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| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 000 | 000 |
| 34. Total Contribution Refunds (from Line 26(d)) | 000 | 000 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 000 | 000 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 000 | 000 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 000 | 000 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 000 | 000 |

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 1 OF 2 | |
| <input type="checkbox"/> 10a | <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be 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)
NIXON PEABODY FEDERAL PAC

A. Full Name (Last, First, Middle Initial)
PELLETIER ANITA

Mailing Address
CLINTON SQUARE, PO Box 31051

City **ROCHESTER** State **NY** Zip Code **14603-1051**

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

Name of Employer: **Nixon Peabody LLP** Occupation: **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) **Exempt legal services**

Aggregate Year-to-Date: **17,358.00**

Date of Receipt
09 30 2004

Amount of Each Receipt this Period
17,358.00

B. Full Name (Last, First, Middle Initial)
BAKER BRUCE J.

Mailing Address
CLINTON SQUARE, P.O. Box 31051

City **ROCHESTER** State **NY** Zip Code **14603-1051**

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

Name of Employer: **Nixon Peabody LLP** Occupation: **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) **Exempt legal services**

Aggregate Year-to-Date: **3,832.50**

Date of Receipt
09 30 2004

Amount of Each Receipt this Period
3,832.50

C. Full Name (Last, First, Middle Initial)
MULLEN STEPHEN G.

Mailing Address
CLINTON SQUARE, P.O. Box 31051

City **ROCHESTER** State **NY** Zip Code **14603**

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

Name of Employer: **Nixon Peabody LLP** Occupation: **Accountant**

Receipt For:
 Primary General
 Other (specify) **Exempt accounting services**

Aggregate Year-to-Date: **2,828.00**

Date of Receipt
09 30 2004

Amount of Each Receipt this Period
2,828.00

SUBTOTAL of Receipts This Page (optional) **24,198.50**

TOTAL This Period (last page this line number only)

EXEMPT LEGAL OR ACCOUNTING SERVICES

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 2 OF 2 | |
| | (check only one) | | | |
| | <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 15a | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15b | <input type="checkbox"/> 16 |
| | | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NIXON PEABODY LLP FEDERAL PAC

A. Full Name (Last, First, Middle Initial)
NIX, GERALDINE J.

Mailing Address
CLINTON SQUARE, P.O. Box 31051

City **ROCHESTER** State **NY** Zip Code **14603-1051**

FEC ID number of contributing federal political committee
C

Name of Employer
Nixon Peabody LLP Occupation
Accountant

Receipt For:
 Primary General
 Other (specify) **Exempt Accounting Services**

Aggregate Year-to-Date
250.00

Date of Receipt
07.30.2009

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (test page this line number only)

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

| | |
|--|-------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
| <input checked="" type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) 10-13-04 |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ Label <input type="checkbox"/> | |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
| <i>JMP</i> PREPARER | 11-18-04 DATE PREPARED |