

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

Office Use Only

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

80-20 PAC

ADDRESS (number and street)

43-34 Union St.

Apt 6-D

☐Check if different  
than previously  
reported. (ACC)

Flushing

NY

11355

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00346015

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☒January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2009

through

12

31

2009

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

Type or Print Name of Treasurer

Jing-Li Yu

Signature of Treasurer

Electronically Filed by Jing-Li Yu

Date

01

31

2010

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 35

Write or Type Committee Name  
80-20 PAC

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	142106.95
(b) Cash on Hand at Beginning of Reporting Period .....	160152.17	
(c) Total Receipts (from Line 19) .....	35738.48	94616.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	195890.65	236723.18
7. Total Disbursements (from Line 31) .....	47517.02	88349.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	148373.63	148373.63
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 35

Write or Type Committee Name  
80-20 PAC

Report Covering the Period:

From:

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

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	15030.00	24900.00
(ii) Unitemized .....	20382.50	64474.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	35412.50	89374.00
(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) .....	35412.50	89374.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	525.00
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	4159.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	325.98	557.25
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)) .....	35738.48	94616.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	35738.48	94616.23

## DETAILED SUMMARY PAGE

of Disbursements

4 / 35

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	43793.02	81125.55	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	43793.02	81125.55	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2250.00	5750.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	1474.00	1474.00	
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))..	47517.02	88349.55	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47517.02	88349.55	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 35

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) .....	35412.50	89374.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35412.50	89374.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	43793.02	81125.55
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	4159.98
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	43793.02	76965.57

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

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

FOR LINE NUMBER: PAGE 6 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

Ved Chaudhary

Mailing Address 22 Jackie Drive

City

Morganville

State

NJ

Zip Code

07751

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Systems Manag-  
ement

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.36058

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Chen

Mailing Address 18313 Kamstra Ave.

City

Cerritos

State

CA

Zip Code

90703-6112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.36055

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Xin-Ran Duan

Mailing Address 50 Holy Family Road #515 Holyoke

City

Holyoke

State

MA

Zip Code

01040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Holyoke Community College

Occupation  
Dean of Science Engineering & Math

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

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

Transaction ID: SA11AI.36036

Amount of Each Receipt this Period

202.50

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

2202.50

**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 7 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

Alfred Foung

Mailing Address 4780 Cerrillos Dr.

City

Woodland Hills

State

CA

Zip Code

91364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Parsons Corp.

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.36060

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

King Man Fung

Mailing Address 290 N. Madison Ave. Apt 206

City

Pasadena

State

CA

Zip Code

91101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caltech Jet Propulsion Lab

Occupation  
scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

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

Transaction ID: SA11AI.36034

Amount of Each Receipt this Period

202.50

**C.**

Full Name (Last, First, Middle Initial)

Hilary Hsu

Mailing Address 10 Jade Place

City

San Francisco

State

CA

Zip Code

94131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City College of San Francisco

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.50

Date of Receipt

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

Transaction ID: SA11AI.36037

Amount of Each Receipt this Period

202.50

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

1905.00

**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 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

Suzanna Lin

Mailing Address 1109 Millpond Court

City

Osprey

State

FL

Zip Code

34229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ingenious Technologies Co-  
poration

Occupation

Co-Founder and Vice President of Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.36040

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mon Yin Lung

Mailing Address 12 Law Library

City

Houston

State

TX

Zip Code

77204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Houston O'Q-  
uinn Law Libr

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.36043

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

George Ow

Mailing Address 203 Highland Ave

City

Santa Cruz

State

CA

Zip Code

95060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.36051

Amount of Each Receipt this Period

1000.00

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

2000.00

**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 9 / 35

(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)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

Roy Saigo

Mailing Address 23051 County Rd 75

City

St. Cloud

State

MN

Zip Code

56301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.36056

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

William T. Sha

Mailing Address 2823 Meyers Rd

City

Oak Brook

State

IL

Zip Code

60523-1623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sha & Associates IncOccupation  
owner

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

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

Transaction ID: SA11AI.36032

Amount of Each Receipt this Period

202.50

**C.**

Full Name (Last, First, Middle Initial)

Lawrence Tom

Mailing Address 4 Gregory LN

City

Newton Square

State

PA

Zip Code

19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHOPOccupation  
physician

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.36038

Amount of Each Receipt this Period

250.00

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

1452.50

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 10 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

William Chi Tong

Mailing Address 10259 Cabery Road

City

Ellicott City

State

MD

Zip Code

21042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Etrons Systems Dallas

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.36053

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Albert Wang

Mailing Address 677 Mission Creek Ct.

City

Fremont

State

CA

Zip Code

94539

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.36049

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Hsiao-Mei Wiedmeyer

Mailing Address 304 S. Garth

City

Columbia

State

MO

Zip Code

65203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Missouri -  
Columbia

Occupation  
administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.36041

Amount of Each Receipt this Period

500.00

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

2500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

S. B. Woo

Mailing Address 5 Farm House Rd.

City

Newark

State

DE

Zip Code

19711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Delaware

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: SA11AI.36062

Amount of Each Receipt this Period

3500.00

**B.**

Full Name (Last, First, Middle Initial)

Yan Xun

Mailing Address 1559 Clubview Blvd. S.

City

Columbus

State

OH

Zip Code

43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: SA11AI.36013

Amount of Each Receipt this Period

135.00

**C.**

Full Name (Last, First, Middle Initial)

Pai-Ling Yin

Mailing Address 269 Everett St

City

Allston

State

MA

Zip Code

02134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.36008

Amount of Each Receipt this Period

135.00

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

3770.00

**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 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

Stella Yu

Mailing Address 715 Galapago

City

Denver CO

State

CO

Zip Code

80204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Artsoup.com

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.36045

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Charles C. Zhang

Mailing Address 796 Oak Shore

City

Portage

State

MI

Zip Code

49024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zhang Financial

Occupation  
President and Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11AI.36047

Amount of Each Receipt this Period

700.00

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

1200.00

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

15030.00

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

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

FOR LINE NUMBER: PAGE 13 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address P.O. Box 609

City

Pittsburgh

State

PA

Zip Code

15230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.69

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 9

Transaction ID: SA17.36063

Amount of Each Receipt this Period

34.42

**B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address P.O. Box 609

City

Pittsburgh

State

PA

Zip Code

15230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA17.36064

Amount of Each Receipt this Period

35.85

**C.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address P.O. Box 609

City

Pittsburgh

State

PA

Zip Code

15230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.62

Date of Receipt

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

Transaction ID: SA17.36065

Amount of Each Receipt this Period

72.08

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

142.35

**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 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address P.O. Box 609

City

Pittsburgh

State

PA

Zip Code

15230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.73

Date of Receipt

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

Transaction ID: SA17.36066

Amount of Each Receipt this Period

66.11

**B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address P.O. Box 609

City

Pittsburgh

State

PA

Zip Code

15230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.47

Date of Receipt

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

Transaction ID: SA17.36067

Amount of Each Receipt this Period

63.74

**C.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address P.O. Box 609

City

Pittsburgh

State

PA

Zip Code

15230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.25

Date of Receipt

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

Transaction ID: SA17.36068

Amount of Each Receipt this Period

53.78

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

183.63

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

325.98

# **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 15 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Seechung Lee	<b>Transaction ID:</b> SB21B.36111 <b>Date of Disbursement</b>
Mailing Address 2195 Canyon Oak Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 7 / 2 0 0 9</div> </div>
City Danville State CA Zip Code 94506 Purpose of Disbursement consulting fee for website Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>543.75</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Suzanna Lin	<b>Transaction ID:</b> SB21B.36086 <b>Date of Disbursement</b>
Mailing Address 1109 Millpond Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 9</div> </div>
City Osprey State FL Zip Code 34229 Purpose of Disbursement paycheck Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>3224.99</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Suzanna Lin	<b>Transaction ID:</b> SB21B.36087 <b>Date of Disbursement</b>
Mailing Address 1109 Millpond Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div>
City Osprey State FL Zip Code 34229 Purpose of Disbursement tax withholdings Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>826.89</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**4595.63**

**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 16 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Suzanna Lin Mailing Address 1109 Millpond Court	<b>Transaction ID:</b> SB21B.36119 <b>Date of Disbursement</b> <div> <div>11</div> <div>06</div> <div>2009</div> </div>
City Osprey State FL Zip Code 34229 Purpose of Disbursement tax withholdings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>811.89</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Suzanna Lin Mailing Address 1109 Millpond Court City Osprey State FL Zip Code 34229 Purpose of Disbursement paycheck Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36132 <b>Date of Disbursement</b> <div> <div>11</div> <div>06</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3224.99</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Suzanna Lin Mailing Address 1109 Millpond Court City Osprey State FL Zip Code 34229 Purpose of Disbursement tax withholdings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36120 <b>Date of Disbursement</b> <div> <div>11</div> <div>27</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>811.89</div>

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

4848.77

**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 17 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Suzanna Lin Mailing Address 1109 Millpond Court	<b>Transaction ID:</b> SB21B.36134 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 7 / 2 0 0 9</div> </div>
City Osprey State FL Zip Code 34229 Purpose of Disbursement paycheck Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>3224.99</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Suzanna Lin Mailing Address 1109 Millpond Court	<b>Transaction ID:</b> SB21B.36127 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 9 / 2 0 0 9</div> </div>
City Osprey State FL Zip Code 34229 Purpose of Disbursement paycheck Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>3224.99</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Suzanna Lin Mailing Address 1109 Millpond Court	<b>Transaction ID:</b> SB21B.36128 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 9</div> </div>
City Osprey State FL Zip Code 34229 Purpose of Disbursement tax withholdings Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>811.89</div>

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

**7261.87**

**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 18 / 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Suzanna Lin	<b>Transaction ID:</b> SB21B.36130 <b>Date of Disbursement</b>
Mailing Address 1109 Millpond Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 9</div> </div>
City Osprey State FL Zip Code 34229	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimb conf calls and po box Candidate Name	<div> <div>118.60</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> SB21B.36073 <b>Date of Disbursement</b>
Mailing Address 1100 Adams Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 9</div> </div>
City Norristown State PA Zip Code 19403	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement service fee Candidate Name	<div> <div>89.09</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> SB21B.36083 <b>Date of Disbursement</b>
Mailing Address 1100 Adams Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 9</div> </div>
City Norristown State PA Zip Code 19403	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement service fee Candidate Name	<div> <div>15.50</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**223.19**

**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 19 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1100 Adams Ave	<b>Transaction ID:</b> SB21B.36093 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 0 / 2 0 0 9</div> </div>
City Norristown State PA Zip Code 19403 Purpose of Disbursement service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>89.09</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1100 Adams Ave City Norristown State PA Zip Code 19403 Purpose of Disbursement service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36104 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 3 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>93.66</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1100 Adams Ave City Norristown State PA Zip Code 19403 Purpose of Disbursement service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36121 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 0 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5.50</div>

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

**188.25**

**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 20 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> SB21B.36123 <b>Date of Disbursement</b>																				
Mailing Address 1100 Adams Ave	<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>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	9												
City Norristown State PA Zip Code 19403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement service fee Candidate Name	<table border="1"> <tr> <td colspan="10">89.99</td> </tr> </table>	89.99																			
89.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) PNC Bank	<b>Transaction ID:</b> SB21B.36069 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 609	<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>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	9												
City Pittsburgh State PA Zip Code 15230	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement service fees Candidate Name	<table border="1"> <tr> <td colspan="10">100.97</td> </tr> </table>	100.97																			
100.97																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) PNC Bank	<b>Transaction ID:</b> SB21B.36070 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 609	<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>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	9												
City Pittsburgh State PA Zip Code 15230	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement service fees Candidate Name	<table border="1"> <tr> <td colspan="10">28.03</td> </tr> </table>	28.03																			
28.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

**218.99**

**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 21 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609	<b>Transaction ID:</b> SB21B.36071 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 9</div> </div>
City Pittsburgh State PA Zip Code 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>25.29</div>
<b>B.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609 City Pittsburgh State PA Zip Code 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36072 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>94.47</div>
<b>C.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609 City Pittsburgh State PA Zip Code 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36078 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 3 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>38.45</div>

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

**158.21**

**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 / 35

<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)  
80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address P.O. Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
service fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.36079

Date of Disbursement

/   /

Amount of Each Disbursement this Period

23.69

**B.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address P.O. Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
service fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.36080

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13.21

**C.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address P.O. Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
service fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.36081

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

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

71.90

**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 23 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609	<b>Transaction ID:</b> SB21B.36082 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 9</div> </div>
City State Zip Code Pittsburgh PA 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>144.50</div>
<b>B.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609 City State Zip Code Pittsburgh PA 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36088 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>31.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609 City State Zip Code Pittsburgh PA 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36089 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>108.34</div>

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

**283.84**

**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 24 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609	<b>Transaction ID:</b> SB21B.36090 <b>Date of Disbursement</b> <div> <div>09</div> <div>02</div> <div>2009</div> </div>
City Pittsburgh State PA Zip Code 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>31.91</div>
<b>B.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609 City Pittsburgh State PA Zip Code 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36091 <b>Date of Disbursement</b> <div> <div>09</div> <div>02</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>17.80</div>
<b>C.</b> Full Name (Last, First, Middle Initial) PNC Bank Mailing Address P.O. Box 609 City Pittsburgh State PA Zip Code 15230 Purpose of Disbursement service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36092 <b>Date of Disbursement</b> <div> <div>09</div> <div>10</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>0.03</div>

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

**49.74**

**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 25 / 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
80-20 PAC

**A.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address P.O. Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
service fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.36101

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.65

**B.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address P.O. Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
service fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.36102

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21.39

**C.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address P.O. Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
service fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.36103

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16.92

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

90.96

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
80-20 PAC

274.37

99.95

34.81

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 27 / 35

<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)  
80-20 PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address P.O. Box 609</p> <p>City Pittsburgh State PA Zip Code 15230</p> <p>Purpose of Disbursement service fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.36116</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.79"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address P.O. Box 609</p> <p>City Pittsburgh State PA Zip Code 15230</p> <p>Purpose of Disbursement service fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.36124</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="157.33"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address P.O. Box 609</p> <p>City Pittsburgh State PA Zip Code 15230</p> <p>Purpose of Disbursement service fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.36125</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="41.66"/></p>

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

**210.78**

**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 28 / 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
80-20 PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address P.O. Box 609</p> <p>City Pittsburgh State PA Zip Code 15230</p> <p>Purpose of Disbursement service fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.36126</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.43"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Stuart Thomas</p> <p>Mailing Address 3701 Wilshire Blvd Suite 1135</p> <p>City Los Angeles State CA Zip Code 90010</p> <p>Purpose of Disbursement internet line August thr September 2009</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.36094</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1100.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Stuart Thomas</p> <p>Mailing Address 3701 Wilshire Blvd Suite 1135</p> <p>City Los Angeles State CA Zip Code 90010</p> <p>Purpose of Disbursement internet line Oct thr Dec 2009</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.36129</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>

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

**2627.43**

**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 29 / 35

<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)  
80-20 PAC

A.

Full Name (Last, First, Middle Initial)  
University of California Regents

Mailing Address 3230 Campbell Hall Box 951546

City Los Angeles State CA Zip Code 90095

Purpose of Disbursement  
21 copies of Untold Civil Rights Stories

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.36106

Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

441.00

B.

Full Name (Last, First, Middle Initial)  
Yi Wang

Mailing Address 250 S. 13th St. Unit 1B

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
paycheck

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.36074

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

2965.16

C.

Full Name (Last, First, Middle Initial)  
Yi Wang

Mailing Address 250 S. 13th St. Unit 1B

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
tax withholdings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.36075

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

1071.72

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

4477.88

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 30 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Yi Wang Mailing Address 250 S. 13th St. Unit 1B	<b>Transaction ID:</b> SB21B.36076 <b>Date of Disbursement</b> <div> <div>08</div> <div>28</div> <div>2009</div> </div>
City Philadelphia State PA Zip Code 19107 Purpose of Disbursement paycheck Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>2965.16</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Yi Wang Mailing Address 250 S. 13th St. Unit 1B City Philadelphia State PA Zip Code 19107 Purpose of Disbursement tax withholdings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36077 <b>Date of Disbursement</b> <div> <div>08</div> <div>31</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1071.72</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Yi Wang Mailing Address 250 S. 13th St. Unit 1B City Philadelphia State PA Zip Code 19107 Purpose of Disbursement paycheck Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36084 <b>Date of Disbursement</b> <div> <div>09</div> <div>29</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2965.16</div>

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

**7002.04**

**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 31 / 35

<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)  
80-20 PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Yi Wang Mailing Address 250 S. 13th St. Unit 1B	<b>Transaction ID:</b> SB21B.36085 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 9</div> </div>
City Philadelphia State PA Zip Code 19107 Purpose of Disbursement tax withholdings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1086.72</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Yi Wang Mailing Address 250 S. 13th St. Unit 1B City Philadelphia State PA Zip Code 19107 Purpose of Disbursement reimb fax conf calls postage survey flow Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36112 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 7 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>469.39</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Yi Wang Mailing Address 250 S. 13th St. Unit 1B City Philadelphia State PA Zip Code 19107 Purpose of Disbursement tax withholdings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.36117 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 6 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1071.72</div>

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

**2627.83**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 32 / 35

<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)  
80-20 PAC**A.**

Full Name (Last, First, Middle Initial)

Yi Wang

Mailing Address 250 S. 13th St. Unit 1B

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
paycheck

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.36133

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Amount of Each Disbursement this Period

2965.16

**B.**

Full Name (Last, First, Middle Initial)

Yi Wang

Mailing Address 250 S. 13th St. Unit 1B

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
tax withholdings

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.36118

Date of Disbursement

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

Amount of Each Disbursement this Period

1097.72

**C.**

Full Name (Last, First, Middle Initial)

Yi Wang

Mailing Address 250 S. 13th St. Unit 1B

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
paycheck

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.36135

Date of Disbursement

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

Amount of Each Disbursement this Period

2965.16

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

7028.04

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 33 / 35

<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)  
80-20 PAC

A.

Full Name (Last, First, Middle Initial)  
Shangyou Zhang

Mailing Address 1 Crossant Ct.

City Landenberg State PA Zip Code 19350

Purpose of Disbursement  
consulting fee for internet and email

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.36109

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 34 / 35

<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)  
80-20 PAC**A.**Full Name (Last, First, Middle Initial)  
Friends of Schumer

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code  
New York NY 10022Purpose of Disbursement  
contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.36100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
Friends of Schumer

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code  
New York NY 10022Purpose of Disbursement  
contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.36110

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
Mark DeSaulnier for Congress

Mailing Address PO Box 6066

City State Zip Code  
Concord CA 94524Purpose of Disbursement  
contribution to campaign

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Special-General

Transaction ID: SB23.36098

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	9

Amount of Each Disbursement this Period

250.00

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

2250.00

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

2250.00

# **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 35 / 35

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

80-20 PAC

A.

Full Name (Last, First, Middle Initial)

80-20 NW Ohio

Mailing Address 2518 Live Oak Road

City  
Sylvania

State  
OH

Zip Code  
43560

Purpose of Disbursement  
chapter membership dues refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.36096

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1374.00

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

1374.00

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

1374.00