



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

Write or Type Committee Name  
ALAMO PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	8

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		41167.61
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	177523.74									
(c) Total Receipts (from Line 19) .....	59700.00	343200.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	237223.74	384367.61								
7. Total Disbursements (from Line 31) .....	49160.58	196304.45								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	188063.16	188063.16								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
ALAMO PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	8

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	11350.00	47850.00
(ii) Unitemized .....	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	11450.00	47950.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	43250.00	290250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	54700.00	338200.00
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 .....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	59700.00	343200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	59700.00	343200.00

## DETAILED SUMMARY PAGE

of Disbursements

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.....	9160.58	71304.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9160.58	71304.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	125000.00
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.....	0.00	0.00
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))..	49160.58	196304.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49160.58	196304.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	54700.00	338200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	54700.00	338200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9160.58	71304.45
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9160.58	71304.45

**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 / 24
	<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	

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)  
ALAMO PAC

**A.**

Full Name (Last, First, Middle Initial)  
Peggy J. Ellis

Mailing Address 6405 Tree Top Cir

City Columbia State MD Zip Code 21045

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

Name of Employer: Ellis & Company, LLC Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 24 / 2010

Transaction ID: SA141

Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. William H. Gates, III

Mailing Address PO Box 97000

City Kirkland State WA Zip Code 98083

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

Name of Employer: Microsoft Occupation: Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 21 / 2010

Transaction ID: SA134

Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Gregg L. Hartley

Mailing Address 857 Cedar Dr

City Deale State MD Zip Code 20751

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

Name of Employer: Cassidy & Associates Occupation: Vice Chairman & COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 21 / 2010

Transaction ID: SA135

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00

**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 7 / 24  
(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)  
**ALAMO PAC**

**A.**

Full Name (Last, First, Middle Initial) Dominic Izzo		Date of Receipt <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>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	8		2	0	1	0													
Mailing Address 19 Coldsprings Ct		<b>Transaction ID:</b> SA136																				
City	State	Zip Code																				
The Woodlands	TX	77380																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"><tr><td>1100.00</td></tr></table>	1100.00																			
1100.00																						
Name of Employer KBR	Occupation Engineer																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>1100.00</td></tr></table>	1100.00																				
1100.00																						

**B.**

Full Name (Last, First, Middle Initial) William Larkin		Date of Receipt <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>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	1	0													
Mailing Address 274 S Railroad St		<b>Transaction ID:</b> SA142																				
City	State	Zip Code																				
Staten Island	NY	10312																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"><tr><td>250.00</td></tr></table>	250.00																			
250.00																						
Name of Employer Greater New York Hospital	Occupation Executive																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>250.00</td></tr></table>	250.00																				
250.00																						

**C.**

Full Name (Last, First, Middle Initial) Fain McDougal		Date of Receipt <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>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	0		2	0	1	0													
Mailing Address 7607 Eastmark Dr Ste 252B		<b>Transaction ID:</b> SA133																				
City	State	Zip Code																				
College Station	TX	77840																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Name of Employer McDougal & Company	Occupation President																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>1000.00</td></tr></table>	1000.00																				
1000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1"><tr><td>2350.00</td></tr></table>	2350.00
2350.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 24  
(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)  
ALAMO PAC

**A.**

Full Name (Last, First, Middle Initial)  
Christopher O'Connor

Mailing Address 175 Huguenot St Unit 1604

City State Zip Code  
New Rochelle NY 10801

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

Name of Employer Greater New York Hospital Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2010

**Transaction ID: SA148**

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Lee Perlman

Mailing Address 10 Orsini Dr

City State Zip Code  
Larchmont NY 10538

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

Name of Employer Greater NY Hospital Association Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID: SA156**

Amount of Each Receipt this Period  
1250.00

**C.**

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

Mailing Address 350 Evandale Rd

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Innovatix Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2010

**Transaction ID: SA145**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 24
	<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)  
ALAMO PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mickey Smith		Date of Receipt	
	Mailing Address PO Box 1418		M M / D D / Y Y Y Y 06 / 24 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA137
	Kilgore	TX	75663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer Self-employed		Occupation Oil and Gas		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Kent Thiry		Date of Receipt	
	Mailing Address 1400 E Oxford Ln		M M / D D / Y Y Y Y 06 / 30 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA150
	Englewood	CO	80113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		2500.00	
Name of Employer DaVita, Inc.		Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) W. H. Hoffmann Estate LLP		Date of Receipt	
	Mailing Address PO Box 669		M M / D D / Y Y Y Y 06 / 30 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA160
	Eastland	TX	76448	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer		Occupation		Partnership: See Memo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> 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 / 24	
	(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)  
ALAMO PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) William Hoffmann, Jr.		Date of Receipt																					
	Mailing Address PO Box 669		<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>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		3	0		2	0	1	0														
	City	State	Zip Code		<b>Transaction ID:</b> SA161																			
	Eastland	TX	76448																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Self-employed		Occupation Attorney		<input type="text" value="1000.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>		<b>[MEMO ITEM]</b>																				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="11350.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 11 / 24</span>
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
**ALAMO PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Abbott Laboratories Employee Political Action Committee	Date of Receipt
	Mailing Address 100 Abbott Park Rd D312 AP6D-2	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City State Zip Code Abbott Park IL 60064	<b>Transaction ID: SA129</b>
	FEC ID number of contributing federal political committee. <input type="text" value="C00040279"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) American Institute of Certified Public Accountants PAC	Date of Receipt
	Mailing Address 220 Leigh Farm Rd	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City State Zip Code Durham NC 27707	<b>Transaction ID: SA154</b>
	FEC ID number of contributing federal political committee. <input type="text" value="C00077321"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) BLUEPAC - Blue Cross Blue Shield Association PAC	Date of Receipt
	Mailing Address 1310 G St NW	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20005	<b>Transaction ID: SA138</b>
	FEC ID number of contributing federal political committee. <input type="text" value="C00194746"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
ALAMO PAC

**A.** Full Name (Last, First, Middle Initial)  
Cardiology Advocacy Alliance PAC

Mailing Address 11065 Home Shore Dr

City Pinckney State MI Zip Code 48169

FEC ID number of contributing federal political committee. **C** C00421040

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID: SA155**  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 Hawaii St  
c/o Congressional Consultants

City El Segundo State CA Zip Code 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID: SA151**  
Amount of Each Receipt this Period: 2500.00

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

Mailing Address 101 Constitution Ave NW Ste 200 E

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 24 / 2010  
**Transaction ID: SA140**  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**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 13 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ALAMO PAC

**A.** Full Name (Last, First, Middle Initial)  
Florida Power & Light Co. Employees PAC

Mailing Address 700 Universe Blvd  
PO BOX 14000

City Juno Beach State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2010

**Transaction ID:** SA139

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Fresenius Medical Care NA PAC

Mailing Address 920 Winter St

City Waltham State MA Zip Code 02451

FEC ID number of contributing federal political committee. **C** C00401299

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  
06 / 30 / 2010

**Transaction ID:** SA158

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Grant Thornton LLP PAC

Mailing Address 175 W Jackson Blvd., Ste. 2000

City Chicago State IL Zip Code 60604

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2010

**Transaction ID:** SA159

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
ALAMO PAC

**A.** Full Name (Last, First, Middle Initial)  
Health Industry Group Purchasing Association PAC

Mailing Address 2025 M St NW Ste 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00423863

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID: SA153**  
Amount of Each Receipt this Period: 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Kidney Care Council, Inc PAC

Mailing Address 1200 G St NW  
Regus HQ Suite 841

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00326736

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 10 / 2010  
**Transaction ID: SA130**  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Kidney Care Partners PAC

Mailing Address 5746 Union Mill Rd Ste 160

City Clifton State VA Zip Code 20124

FEC ID number of contributing federal political committee. **C** C00431924

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 24 / 2010  
**Transaction ID: SA147**  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
ALAMO PAC

**A.** Full Name (Last, First, Middle Initial)  
KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 17 / 2010  
**Transaction ID: SA132**  
Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Medassets PAC

Mailing Address 200 N Point Ctr E Ste 600

City Alpharetta State GA Zip Code 30022

FEC ID number of contributing federal political committee. **C** C00458380

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 24 / 2010  
**Transaction ID: SA146**  
Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
Medassets PAC

Mailing Address 200 N Point Ctr E Ste 600

City Alpharetta State GA Zip Code 30022

FEC ID number of contributing federal political committee. **C** C00458380

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2750.00

Date of Receipt: 06 / 30 / 2010  
**Transaction ID: SA149**  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5250.00

**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 16 / 24

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
ALAMO PAC

**A.**

Full Name (Last, First, Middle Initial)  
NuStarPAC

Mailing Address 2330 North Loop 1604 West

City State Zip Code  
San Antonio TX 78248

FEC ID number of contributing federal political committee. **C** C00435321

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2010

Transaction ID: SA164

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Premier Employee's Civic Action Fund

Mailing Address 444 N Capitol St NW Ste 625

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00346288

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2010

Transaction ID: SA157

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
PricewaterhouseCoopers PAC

Mailing Address 1301 K Street NW, Ste. 800 W

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2010

Transaction ID: SA163

Amount of Each Receipt this Period

2500.00

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

10000.00

**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 17 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ALAMO PAC

A.

Full Name (Last, First, Middle Initial)  
Renal Physician's Association

Mailing Address 1700 Rockville Pike Ste 220

City State Zip Code  
Rockville MD 20852

FEC ID number of contributing federal political committee. **C** C00409391

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  
06 / 10 / 2010

Transaction ID: SA131

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	43250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 24
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ALAMO PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF TREY GRAYSON		Date of Receipt
	Mailing Address PO Box 175726		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Covington	KY	41017
	FEC ID number of contributing federal political committee.		<input type="text" value="C00461681"/>
Name of Employer		Occupation	Transaction ID: SA128 Amount of Each Receipt this Period <input type="text" value="5000.00"/> General Election Contribution Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5000.00"/>

**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 19 / 24

<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)  
ALAMO PAC

A.	Full Name (Last, First, Middle Initial) Aristeia Group Inc.	Transaction ID: SB74 Date of Disbursement 06 / 28 / 2010
	Mailing Address 1203 Portner Rd	Amount of Each Disbursement this Period 3000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Fundraising Consulting Fee: not on behalf of any particular	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SB73 Date of Disbursement 06 / 24 / 2010
	Mailing Address PO Box 660481	Amount of Each Disbursement this Period 49.04
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Shipping	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Amanda M. Gravitt	Transaction ID: SB77 Date of Disbursement 06 / 28 / 2010
	Mailing Address 11160 Jollyville Rd Apt 1603	Amount of Each Disbursement this Period 932.86
	City Austin State TX Zip Code 78759	
	Purpose of Disbursement Payroll and Travel Reimbursements	
	Candidate Name	Category/ Type
	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) ..... ▶

3981.90

**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 20 / 24

<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)  
ALAMO PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Hotel Indigo Mailing Address 830 N Saint Marys St City San Antonio State TX Zip Code 78205 Purpose of Disbursement Lodging and Parking Candidate Name	Transaction ID: SB78 Date of Disbursement 06 / 28 / 2010 Amount of Each Disbursement this Period 151.93

[MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Lockart Atchley & Associates Mailing Address 6850 Austin Center Blvd Ste 180 City Austin State TX Zip Code 78731 Purpose of Disbursement Payroll accounting Services Candidate Name	Transaction ID: SB72 Date of Disbursement 06 / 24 / 2010 Amount of Each Disbursement this Period 175.20

<b>C.</b> Full Name (Last, First, Middle Initial) Sahl Company, The Mailing Address 16714 Fitzhugh Rd City Dripping Springs State TX Zip Code 78620 Purpose of Disbursement Fundraising Consulting Fee: not on behalf of any particular Candidate Name	Transaction ID: SB76 Date of Disbursement 06 / 28 / 2010 Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2675.20
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 24

<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)  
ALAMO PAC

A.

Full Name (Last, First, Middle Initial)  
Dolly Gonzales Trolley

Transaction ID: SB75

Date of Disbursement

Mailing Address 2514D Nantucket Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	0

City Houston State TX Zip Code 77057

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Fundraising Consulting Fee: not on behalf of any particular

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2500.00
---------

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

9157.10
---------

**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 / 24

<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)  
ALAMO PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Carly for California <hr/> Mailing Address 915 L St Ste C-378 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement <hr/> Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB81 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Category/ Type
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California <hr/> Mailing Address 915 L St Ste C-378 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Primary Debt Retirement <hr/> Candidate Name Carly Fiorina <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB82 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Category/ Type
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Dan Coats for Indiana <hr/> Mailing Address PO Box 301141 <hr/> City Indianapolis State IN Zip Code 46230 <hr/> Purpose of Disbursement <hr/> Candidate Name Daniel R. Coats <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB71 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 / 24

<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)  
ALAMO PAC

A.	Full Name (Last, First, Middle Initial) Friends of Sharron Angle	Transaction ID: SB69
	Mailing Address PO Box 33058	Date of Disbursement 06 / 24 / 2010
	City Reno State NV Zip Code 89533	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name Sharron Angle	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jim Huffman for Senate	Transaction ID: SB70
	Mailing Address 311 B Ave Ste P	Date of Disbursement 06 / 24 / 2010
	City Lake Oswego State OR Zip Code 97034	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name Mr. James Lloyd Huffman, II	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rand Paul for US Senate	Transaction ID: SB67
	Mailing Address 1332 Andrea St	Date of Disbursement 06 / 24 / 2010
	City Bowling Green State KY Zip Code 42104	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name Rand Paul	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 24

<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)  
ALAMO PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Rand Paul for US Senate <hr/> Mailing Address 1332 Andrea St <hr/> City Bowling Green State KY Zip Code 42104 <hr/> Purpose of Disbursement Primary Debt Retirement <hr/> Candidate Name Rand Paul <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB80 Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2010
	Amount of Each Disbursement this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ron Johnson for Senate Inc. <hr/> Mailing Address 601 Oregon St Ste B <hr/> City Oshkosh State WI Zip Code 54902 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Ronald Harold Johnson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB68 Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2010
	Amount of Each Disbursement this Period 5000.00

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

10000.00

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

40000.00