



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

Write or Type Committee Name  
NEW PIONEERS PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

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		17355.08
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	92735.27									
(c) Total Receipts (from Line 19) .....	44400.00	210631.78								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	137135.27	227986.86								
7. Total Disbursements (from Line 31) .....	75650.27	166501.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	61485.00	61485.00								
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  
NEW PIONEERS PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

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) .....	2400.00	40400.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2400.00	40400.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	42000.00	152500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	44400.00	192900.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	17731.78
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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)) .....	44400.00	210631.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	44400.00	210631.78

## 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.....	8250.27	24451.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8250.27	24451.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	67400.00	142050.00
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))..	75650.27	166501.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	75650.27	166501.86

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	44400.00	192900.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	44400.00	192900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8250.27	24451.86
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8250.27	24451.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 32	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.**

Full Name (Last, First, Middle Initial) James Derderian		Date of Receipt
Mailing Address 4720 32nd St., North		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
City	State	Zip Code
ARlington	VA	22207
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.4807
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2400.00"/>
Name of Employer Stanton Park Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2400.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2400.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 32  
(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)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 Abbott Park Rd.  
D312 AP6D-2

City State Zip Code  
Abbott Park IL 60064

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** SA11C.4836

Amount of Each Receipt this Period  
2500.00

Contribution

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

Mailing Address 20 F Street, N.W.  
Suite 350

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** SA11C.4823

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
ALLIANCE FOR QUALITY NURSING HOME CARE INC. POLITICAL ACTION COMMITTEE (AQNHCPAC)

Mailing Address 1350 Connecticut Avenue NW  
Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00432336

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** SA11C.4841

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 / 32  
(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)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 L Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** SA11C.4838

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street, NW  
Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** SA11C.4809

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 JFK Blvd, 49th Floor  
35th Floor

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** SA11C.4813

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 9 / 32  
(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)  
NEW PIONEERS PAC

**A.**

Full Name (Last, First, Middle Initial)  
FEDERATION OF AMERICAN HOSPITALS PAC

Mailing Address 801 PENNSYLVANIA AVENUE  
SUITE 245

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11C.4822

Amount of Each Receipt this Period  
2500.00

**B.**

Full Name (Last, First, Middle Initial)  
HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 975 F Street, NW  
Suite 550

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: SA11C.4811

Amount of Each Receipt this Period  
2500.00

**C.**

Full Name (Last, First, Middle Initial)  
JPMORGAN CHASE & CO. PAC

Mailing Address 10 S. Dearborn St  
IL 1-0520

City State Zip Code  
Chicago IL 60603

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

Transaction ID: SA11C.4818

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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: <span style="float: right;">PAGE 10 / 32</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)  
NEW PIONEERS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)	Date of Receipt
	Mailing Address 600 14th Street, NW Suite 800	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20005	<b>Transaction ID:</b> SA11C.4820
	FEC ID number of contributing federal political committee. <input type="text" value="C00236489"/>	Amount of Each Receipt this Period
	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="3500.00"/>	<input type="text" value="2500.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)	Date of Receipt
	Mailing Address 600 14th Street, NW Suite 800	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20005	<b>Transaction ID:</b> SA11C.4821
	FEC ID number of contributing federal political committee. <input type="text" value="C00236489"/>	Amount of Each Receipt this Period
	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="5000.00"/>	<input type="text" value="1500.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)	Date of Receipt
	Mailing Address 601 Pennsylvania Ave., NW North Building, Suite 1200	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20004	<b>Transaction ID:</b> SA11C.4834
	FEC ID number of contributing federal political committee. <input type="text" value="C00097485"/>	Amount of Each Receipt this Period
	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="5000.00"/>	<input type="text" value="1500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5500.00"/>
<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 11 / 32  
(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)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 23 / 2010  
Transaction ID: SA11C.4825  
Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA-AC)

Mailing Address 25 Massachusetts Avenue, NW #100

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: SA11C.4843  
Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Mailing Address P. O. Box 11586

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 23 / 2010  
Transaction ID: SA11C.4816  
Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**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 / 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
TW TELECOM INC. POLITICAL ACTION COMMITTEE

Mailing Address 10475 Park Meadows Drive

City State Zip Code  
Littleton CO 80124

FEC ID number of contributing federal political committee. **C** C00355941

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 Y  
 09 / 10 / 2010

**Transaction ID:** SA11C.4814

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

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 Y  
 09 / 30 / 2010

**Transaction ID:** SA11C.4840

Amount of Each Receipt this Period  
2000.00

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

**TOTAL** This Period (last page this line number only) ..... ► 42000.00

**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 13 / 32

<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)  
NEW PIONEERS PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Expresss</p> <p>Mailing Address PO Box 360001</p> <p>City Ft. Lauderdale State FL Zip Code 33336</p> <p>Purpose of Disbursement See Memo</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.4689</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="272.80"/></p> <p><input type="text" value="002"/> Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Best Western-Newberg Inn</p> <p>Mailing Address 2211 Portland Rd.</p> <p>City Newberg State OR Zip Code 97132</p> <p>Purpose of Disbursement PAC Travel-Lodging</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.4689.0</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="272.80"/></p> <p>[MEMO ITEM]</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Catalyst Group RW LLC</p> <p>Mailing Address 1115 Massachusetts Ave., NW Lower Level</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement PAC Fundraising Consulting/Event Catering</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.4649</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1133.57"/></p> <p><input type="text" value="011"/> Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1406.37"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address PO Box 94014</p> <p>City Palatine State IL Zip Code 60094</p> <p>Purpose of Disbursement See Memos</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><b>Transaction ID:</b> SB21B.4791</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4830.15"/></p> <p>001 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Blue Star Charter</p> <p>Mailing Address 8250 NE MKL Jr. Blvd.</p> <p>City Portland State OR Zip Code 97211</p> <p>Purpose of Disbursement PAC Transportation</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><b>Transaction ID:</b> SB21B.4791.0</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1201.15"/></p> <p>002 Category/ Type</p> <p>[MEMO ITEM]</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Allison Inn Spa</p> <p>Mailing Address 225 Allison Lane</p> <p>City Newberg State OR Zip Code 97132</p> <p>Purpose of Disbursement PAC Event Site Rental/Catering</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><b>Transaction ID:</b> SB21B.4791.1</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3024.00"/></p> <p>003 Category/ Type</p> <p>[MEMO ITEM]</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="4830.15"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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 / 32

<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)  
NEW PIONEERS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Sokol Blosser Winery <hr/> Mailing Address PO Box 399 <hr/> City Dundee State OR Zip Code 97115 <hr/> Purpose of Disbursement PAC Event Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4791.2 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 450.00  <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Taste Catering <hr/> Mailing Address 3516 Valley Dr. <hr/> City Alexandria State VA Zip Code 22302 <hr/> Purpose of Disbursement PAC Event Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4651 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 2013.75

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

2013.75

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

8250.27

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
BASS VICTORY COMMITTEE

Mailing Address PO Box 3451

City Concord State NH Zip Code 03302

Purpose of Disbursement  
Contribution

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Transaction ID: SB23.4745  
Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
BENISHEK FOR CONGRESS

Mailing Address 802 Pentoga Trail

City Crystal Falls State MI Zip Code 49920

Purpose of Disbursement  
Contribution

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
**BOBBY SCHILLING FOR CONGRESS**

Mailing Address 367 Avenue of The Cities Suite D

City East Moline State IL Zip Code 61244

Purpose of Disbursement  
Contribution

Candidate Name  
**ROBERT T MR. SCHILLING**

Office Sought:  House  
 Senate  
 President

State: IL District: 17

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.4734  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**BUCSHON FOR CONGRESS**

Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

Purpose of Disbursement  
Contribution

Candidate Name  
**LARRY D BUCSHON**

Office Sought:  House  
 Senate  
 President

State: IN District: 08

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.4761  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**CANSECO FOR CONGRESS**

Mailing Address 10004 Wurzbach Road #366

City San Antonio State TX Zip Code 78230

Purpose of Disbursement  
Contribution

Candidate Name  
**FRANCISCO 'QUICO' CANSECO**

Office Sought:  House  
 Senate  
 President

State: TX District: 23

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.4683  
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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
CHRIS GIBSON FOR CONGRESS

Mailing Address PO Box 247

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement  
Contribution

Candidate Name  
CHRIS P GIBSON

Office Sought:  House  
 Senate  
 President  
State: NY District: 20

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4687  
Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
CRAWFORD FOR CONGRESS

Mailing Address PO Box 16956

City Jonesboro State AR Zip Code 72403

Purpose of Disbursement  
Contribution

Candidate Name  
ERIC ALAN RICK CRAWFORD

Office Sought:  House  
 Senate  
 President  
State: AR District: 01

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4760  
Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

1900.00

**C.** Full Name (Last, First, Middle Initial)  
DANIEL WEBSTER FOR CONGRESS

Mailing Address 3400 Old Winter Garden Road

City Orlando State FL Zip Code 32805

Purpose of Disbursement  
Contribution

Candidate Name  
DANIEL WEBSTER

Office Sought:  House  
 Senate  
 President  
State: FL District: 08

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4668  
Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

500.00

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

2900.00

**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)

<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)  
NEW PIONEERS PAC

**A. DANIEL WEBSTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 3400 Old Winter Garden Road

City Orlando State FL Zip Code 32805

Purpose of Disbursement Contribution

Candidate Name DANIEL WEBSTER

Office Sought:  House  Senate  President

State: FL District: 08

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB23.4776

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B. DAVID SCHWEIKERT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 15749 E El Lago Blvd

City Fountain Hills State AZ Zip Code 85268

Purpose of Disbursement Contribution

Candidate Name DAVID SCHWEIKERT

Office Sought:  House  Senate  President

State: AZ District: 05

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB23.4721

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C. DEMMER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 502 2ND ST NE  
PO BOX 6

City HAYFIELD State MN Zip Code 55940

Purpose of Disbursement Contribution

Candidate Name RANDY LEE DEMMER

Office Sought:  House  Senate  President

State: MN District: 01

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB23.4738

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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 32

<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)  
NEW PIONEERS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF DAVID HARMER <hr/> Mailing Address 9321 SILVERBEND LANE <hr/> City ELK GROVE State CA Zip Code 95624 Purpose of Disbursement Contribution Candidate Name DAVID JEFFREY HARMER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4772 Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 1900.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF FRANK GUINTA <hr/> Mailing Address P.O. Box 877 <hr/> City Manchester State NH Zip Code 03105 Purpose of Disbursement Contribution Candidate Name FRANK GUINTA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4742 Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JOE HECK <hr/> Mailing Address PO Box 750114 <hr/> City Las Vegas State NV Zip Code 89136 Purpose of Disbursement Contribution Candidate Name JOE HECK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4780 Date of Disbursement 09 / 27 / 2010
	Amount of Each Disbursement this Period 1900.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4800.00

**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)

<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)  
NEW PIONEERS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) JEFF PERRY FOR CONGRESS  Mailing Address PO Box 1435  City Sandwich State MA Zip Code 02563  Purpose of Disbursement Contribution Candidate Name JEFFREY DAVIS PERRY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4736 Date of Disbursement 09 / 27 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) JON RUNYAN FOR CONGRESS, INC  Mailing Address PO Box 225  City Colonia State NJ Zip Code 07067  Purpose of Disbursement Contribution Candidate Name JON RUNYAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4679 Date of Disbursement 09 / 10 / 2010  Amount of Each Disbursement this Period 500.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) KAPANKE FOR CONGRESS  Mailing Address P.O. BOX 937 PO BOX 937  City LA CROSSE State WI Zip Code 54601  Purpose of Disbursement Contribution Candidate Name DAN KAPANKE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4752 Date of Disbursement 09 / 27 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type

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

2500.00

**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)

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<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)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) KELLY FOR CONGRESS	Transaction ID: SB23.4723
	Mailing Address PO BOX 89520	Date of Disbursement 09 / 27 / 2010
	City TUCSON State AZ Zip Code 85752	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name JESSE KELLY	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KOSTER FOR CONGRESS	Transaction ID: SB23.4750
	Mailing Address PO Box 231	Date of Disbursement 09 / 27 / 2010
	City Arlington State WA Zip Code 98223	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name JOHN M KOSTER	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KRISTI FOR CONGRESS	Transaction ID: SB23.4783
	Mailing Address PO Box 852	Date of Disbursement 09 / 27 / 2010
	City Sioux Falls State SD Zip Code 57101	Amount of Each Disbursement this Period 1900.00
	Purpose of Disbursement Contribution Candidate Name KRISTI LYNN NOEM	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD 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) .....	<b>3900.00</b>
<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)

<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)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) LOU BARLETTA FOR CONGRESS	Transaction ID: SB23.4781 Date of Disbursement
	Mailing Address P.O. BOX 128	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Hazleton State PA Zip Code 18201	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1900.00"/>
	Candidate Name LOU BARLETTA	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARTHA ROBY FOR CONGRESS	Transaction ID: SB23.4769 Date of Disbursement
	Mailing Address PO Box 195	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Montgomery State AL Zip Code 36101	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1400.00"/>
	Candidate Name MARTHA ROBY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MIKE KELLY FOR CONGRESS	Transaction ID: SB23.4681 Date of Disbursement
	Mailing Address PO BOX 476	<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City LYNDORA State PA Zip Code 16045	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name GEORGE J JR KELLY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	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) .....	<input type="text" value="3800.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) MIKE KEOWN FOR CONGRESS	Transaction ID: SB23.4732 Date of Disbursement
	Mailing Address 1086 West Violet Avenue PO Box 96	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Coolidge State GA Zip Code 31738	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name MICHAEL (MIKE) HUEL KEOWN	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MOBROOKSFORCONGRESS.COM	Transaction ID: SB23.4665 Date of Disbursement
	Mailing Address 7610 FOXFIRE DRIVE	<input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City HUNTSVILLE State AL Zip Code 35802	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name MO BROOKS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MULVANEY FOR CONGRESS	Transaction ID: SB23.4782 Date of Disbursement
	Mailing Address P.O. Box 1975	<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Lancaster State SC Zip Code 29721	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1900.00"/>
	Candidate Name JOHN MICHAEL 'MICK' MULVANEY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	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) .....	<input type="text" value="3400.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

A.

Full Name (Last, First, Middle Initial)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Transaction ID: SB23.4646  
Date of Disbursement

Mailing Address 320 FIRST STREET

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

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

011  
Category/  
Type

5400.00
---------

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)  
NUNNELEE FOR CONGRESS

Transaction ID: SB23.4779  
Date of Disbursement

Mailing Address 438 EAST MAIN ST  
PO BOX 7092

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

City TUPELO State MS Zip Code 38802

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

011  
Category/  
Type

1400.00
---------

Candidate Name  
PATRICK ALAN NUNNELEE

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: MS District: 01

C.

Full Name (Last, First, Middle Initial)  
PAUL GOSAR FOR CONGRESS

Transaction ID: SB23.4770  
Date of Disbursement

Mailing Address 2222 E. Cedar Ave.

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

City Flagstaff State AZ Zip Code 86004

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution

011  
Category/  
Type

2400.00
---------

Candidate Name  
PAUL ANTHONY GOSAR

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: AZ District: 01

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

9200.00

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)

<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)  
NEW PIONEERS PAC

**A. RANDY ALTSCHULER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 657

City State Zip Code  
Stony Brook NY 11790

Purpose of Disbursement  
Contribution

Candidate Name  
RANDOLPH MR. ALTSCHULER

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 01

Transaction ID: SB23.4746

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

**B. RIBBLE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 7200

City State Zip Code  
APPLETON WI 54912

Purpose of Disbursement  
Contribution

Candidate Name  
REID RIBBLE

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WI District: 08

Transaction ID: SB23.4756

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

**C. ROBERT HURT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2

City State Zip Code  
CHATHAM VA 24531

Purpose of Disbursement  
Contribution

Candidate Name  
ROBERT HURT

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: VA District: 05

Transaction ID: SB23.4784

Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional) ▶

4400.00

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)

<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)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) RYAN FRAZIER FOR COLORADO	Transaction ID: SB23.4727
	Mailing Address Po Box 140182	Date of Disbursement 09 / 27 / 2010
	City Edgewater State CO Zip Code 80214	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name RYAN L FRAZIER	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SANDY ADAMS FOR CONGRESS	Transaction ID: SB23.4670
	Mailing Address P. O. Box 1566	Date of Disbursement 09 / 10 / 2010
	City Orlando State FL Zip Code 32802	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name SANDY ADAMS	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SANDY ADAMS FOR CONGRESS	Transaction ID: SB23.4777
	Mailing Address P. O. Box 1566	Date of Disbursement 09 / 27 / 2010
	City Orlando State FL Zip Code 32802	Amount of Each Disbursement this Period 1900.00
	Purpose of Disbursement Contribution Candidate Name SANDY ADAMS	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	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) .....	<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>SOUTHERLAND FOR CONGRESS</b>  Mailing Address <b>PO BOX 1692</b>  City <b>LYNN HAVEN</b> State <b>FL</b> Zip Code <b>32444</b> Purpose of Disbursement Contribution <input type="checkbox"/> <b>011</b> Candidate Name <b>WILLIAM STEVE II SOUTHERLAND</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>FL</b> District: <b>02</b>	Transaction ID: <b>SB23.4667</b> Date of Disbursement M M / D D / Y Y Y Y <b>09 / 10 / 2010</b>  Amount of Each Disbursement this Period <b>500.00</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>SOUTHERLAND FOR CONGRESS</b>  Mailing Address <b>PO BOX 1692</b>  City <b>LYNN HAVEN</b> State <b>FL</b> Zip Code <b>32444</b> Purpose of Disbursement Contribution <input type="checkbox"/> <b>011</b> Candidate Name <b>WILLIAM STEVE II SOUTHERLAND</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>FL</b> District: <b>02</b>	Transaction ID: <b>SB23.4775</b> Date of Disbursement M M / D D / Y Y Y Y <b>09 / 27 / 2010</b>  Amount of Each Disbursement this Period <b>1900.00</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>SPIKE MAYNARD FOR CONGRESS</b>  Mailing Address <b>PO BOX 1</b>  City <b>WILLIAMSON</b> State <b>WV</b> Zip Code <b>25661</b> Purpose of Disbursement Contribution <input type="checkbox"/> <b>011</b> Candidate Name <b>ELLIOTT EDWARD MAYNARD</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>WV</b> District: <b>03</b>	Transaction ID: <b>SB23.4758</b> Date of Disbursement M M / D D / Y Y Y Y <b>09 / 27 / 2010</b>  Amount of Each Disbursement this Period <b>1000.00</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3400.00</b>
<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)

<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)  
NEW PIONEERS PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) STEVE FINCHER FOR CONGRESS</p> <p>Mailing Address PO BOX 11153</p> <p>City JACKSON State TN Zip Code 38308</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name STEVE FINCHER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4764</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) VAN TRAN FOR CONGRESS</p> <p>Mailing Address 2150 RIVER PLAZA DR #150</p> <p>City SACRAMENTO State CA Zip Code 95833</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name VAN TRAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4773</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) VICKY HARTZLER FOR CONGRESS</p> <p>Mailing Address PO BOX 531</p> <p>City HARRISONVILLE State MO Zip Code 64701</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name VICKY JO HARTZLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4740</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>5800.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>.....</p>

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

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) VOTETIPTON.COM	Transaction ID: SB23.4725 Date of Disbursement 09 / 27 / 2010
	Mailing Address PO BOX 846	
	City CORTEZ State CO Zip Code 81321	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name SCOTT R TIPTON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) WALBERG FOR CONGRESS	Transaction ID: SB23.4677 Date of Disbursement 09 / 10 / 2010
	Mailing Address 6769 Teachout Rd.	
	City Tipton State MI Zip Code 49287	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name TIMOTHY L. WALBERG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) WALBERG FOR CONGRESS	Transaction ID: SB23.4778 Date of Disbursement 09 / 27 / 2010
	Mailing Address 6769 Teachout Rd.	
	City Tipton State MI Zip Code 49287	Amount of Each Disbursement this Period 1900.00
	Purpose of Disbursement Contribution Candidate Name TIMOTHY L. WALBERG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	011 Category/ Type
	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) .....	<b>3400.00</b>
<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 32 / 32

<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)  
NEW PIONEERS PAC

A.

Full Name (Last, First, Middle Initial)  
YODER FOR CONGRESS

Mailing Address PO BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement  
Contribution

Candidate Name  
KEVIN W YODER

Office Sought:  House  
 Senate  
 President  
State: KS District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4672  
Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
YODER FOR CONGRESS

Mailing Address PO BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement  
Contribution

Candidate Name  
KEVIN W YODER

Office Sought:  House  
 Senate  
 President  
State: KS District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4762  
Date of Disbursement

09 / 27 / 2010

Amount of Each Disbursement this Period

1900.00

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

2400.00

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

67400.00