PAGE 1 / 17

Image# 14960073432

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Offic	ce Use Only	
1.	NAME C	PF TEE (in full)	TYPE OR	PRINT ▼		mple: If typion the lines.	ng, type	12FE4	4M5		
Р	ODER	PAC									1
AD	DRESS (n	umber and street)	3520 Ma	ple Court							
ř		ck if different									
ŀ	than repo	n previously orted. (ACC)	Falls Ch	urch				VA L	2	2041	
2.	FEC IDI	ENTIFICATION N	UMBER ▼		CITY ▲		5	STATE A		ZIP CC	DDE 🛦
	C	000452276			3. IS THIS REPORT	\ \ \	NEW N) OR		AMEND (A)	ED	
4.	TYPE (OF REPORT	(b) Mor Rep		Feb 20 (M2)		May 20 (M5)		Aug 20 (N	/18)	Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	April 15 Quarterly Report (Q1			Mar 20 (M3)		Jun 20 (M6)		Sep 20 (N	И9)	Dec 20 (M12) (Non-Election Year Only)
					Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M	110)	Jan 31 (YE)
	ш			12-Day		Primary (12F)	Gen	eral (12G)		Runoff (12R)
		July 15 Quarterly Report (C	Q2)	PRE-Election Report for t		Convention (120)	Sne	cial (12S)		
		October 15 Quarterly Report (C	03)	rioport for t		Convention	120)	Орс	0141 (120)		
	×	January 31 Year-End Report (\)		E	Election on	M M /	D D /	Y Y Y Y	Y	in the State o	of
		July 31 Mid-Year Report (Non-election Year Only) (MY)	(d)	30-Day POST-Elect		General (300	G)	Run	off (30R)		Special (30S)
	П	Termination Report		Report for t	ne:	M - M /	D D /	Y Y Y	Y	in the	
		(TER)		E	Election on					State of	of
5.	Covering	Period 07	7 01		013	through	12	31	D / Y	2013	
l ce	ertify that	have examined th	nis Report a	and to the be	est of my kno	wledge and I	pelief it is tru	e, correc	t and con	nplete.	
	-	Name of Treasure	-								
Sig	nature of	Treasurer Cath	erine Pino			[Electronicall ₂	Filed] D	ate	M M /	^D D /	2014
NO	TE: Submi	ssion of false, erron	eous, or inc	omplete infor	mation may su	bject the per	son signing th	is Report	to the pe	nalties of 2	U.S.C. §437g.
1	Us								F	EC FOF Rev. 12/2	
	Or	iiy [1		I	I	1		

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name PODER PAC 07 2013 2013 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 7125.52 January 1, 2013 (b) Cash on Hand at 17767.41 Beginning of Reporting Period..... 37914.70 9874.70 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 27642.11 45040.22 6(a) and 6(c) for Column B)..... 15135.91 32534.02 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 12506.20 12506.20 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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Γ	ט	Γ	Г,	~	C

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0050.00	40000 00
(i) Itemized (use Schedule A)	3250.00	18900.00
(ii) Unitemized	350.00	9740.00
(iii) TOTAL (add	7	
Lines 11(a)(i) and (ii)▶	3600.00	28640.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	3000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	3600.00	31640.00
Totals to Line 33, page 5)▶ . Transfers From Affiliated/Other	3000.00	01010.00
Party Committees	0.00	0.00
	7	7 1 1 1
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	6274.70	6274.70
(Carry Totals to Line 37, page 5)		0214.10
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. 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
(b) Loviii i unus (nom ochedule 113)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	9874.70	
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	9874.70	37914.7

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
 Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4 			outonau Tour to bute				
(i) Federal Share		0.00	0.00				
· · · · · · · · · · · · · · · · · · ·		0.00	0.00				
(ii) Non-Federal Share(b) Other Federal Operating		0.00	0.00				
Expenditures		11035.91	27734.02				
(c) Total Operating Expenditure	es						
(add 21(a)(i), (a)(ii), and (b		11035.91	27734.02				
Transfers to Affiliated/Other Par Committees	1	0.00	0.00				
Contributions to Federal Candidates/Committees							
and Other Political Committees		2000.00	2000.00				
Independent Expenditures (use Schedule E)		0.00	0.00				
Coordinated Party Expenditures		7					
(2 U.S.C. §441a(d)) (use Schedule F)		0.00	0.00				
		0.00	0.00				
Loan Repayments Made		0.00	0.00				
Loans Made		0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other			100.00				
Than Political Committees		100.00	100.00				
(b) Political Party Committees		0.00	0.00				
(c) Other Political Committees			200				
(such as PACs)		0.00	0.00				
(d) Total Contribution Refunds							
(add Lines 28(a), (b), and	(c))	100.00	100.00				
Other Disbursements	-	2222.22	2700.00				
Other Disbursements		2000.00	2700.00				
Federal Election Activity (2 U.S	.C. §431(20))						
(a) Allocated Federal Election	Activity						
(from Schedule H6) (i) Federal Share		0.00	0.00				
(i) I odorar oriaro		7 1 7 1 7 1					
(ii) "Levin" Share		0.00	0.00				
(b) Federal Election Activity Pa With Federal Funds		0.00	0.00				
(c) Total Federal Election Activ		7					
Lines 30(a)(i), 30(a)(ii) and	• '	0.00	0.00				
Total Diaburaamanta (add Lines	21(a) 22						
Total Disbursements (add Lines 23, 24, 25, 26, 27, 28(d), 29 ar		15135.91	32534.02				
, , -, -,,(-), w.	- (-//	10.000	02004.02				
Total Federal Disbursements	00()(")						
(subtract Line 21(a)(ii) and Line		15135.91	32534.02				
from Line 31)		10100.01	32004.02				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2003)		r age 3				
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3600.00	31640.00				
4. Total Contribution Refunds (from Line 28(d))	100.00	100.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3500.00	31540.00				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	11035.91	27734.02				
7. Offsets to Operating Expenditures (from Line 15, page 3)	6274.70	6274.70				
8. Net Operating Expenditures (subtract Line 37 from Line 36)	4761.21	21459.32				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

17

for each category of the Detailed Summary Page 14 13 15 16 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) PODER PAC Full Name (Last, First, Middle Initial) Lydia Madrigal Date of Receipt Mailing Address #4 Bay Meadows 07 2013 31 City State Zip Code Transaction ID : C9360214 TX Midland 79705 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Owner/CEO Express Nursing Home Health Care Servi Receipt For: Aggregate Year-to-Date ▼ Primary General 4000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lydia Madrigal Date of Receipt Mailing Address #4 Bay Meadows 09 20 2013 City State Zip Code Transaction ID: C9435290 Midland TX 79705 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Name of Employer Occupation Express Nursing Home Health Care Servi Owner/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 4000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maria Mercedes Olivieri Date of Receipt Mailing Address 7027 Veering Ln 07 07 2013 City Zip Code State Transaction ID: C9283110 Burke VA 22015-4445 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Consultant Self-Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 3050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 17 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 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) PODER PAC Full Name (Last, First, Middle Initial) Maria Mercedes Olivieri Date of Receipt Mailing Address 7027 Veering Ln 08 07 2013 City Zip Code State Transaction ID: C9375800 VA Burke 22015-4445 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Self-Employed Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maria Mercedes Olivieri Date of Receipt Mailing Address 7027 Veering Ln 09 07 2013 City State Zip Code Transaction ID: C9423138 VA Burke 22015-4445 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Self-Employed Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maria Mercedes Olivieri Date of Receipt Mailing Address 7027 Veering Ln 2013 10 07 City Zip Code State Transaction ID: C9448689 Burke VA 22015-4445 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Consultant Self-Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 8 OF

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EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	ck only 11a 13	or	11b 14	11c	12 16	17
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) PODER PAC							
Full Name (Last, First, Middle Initial) Maria Mercedes Olivieri Mailing Address 7027 Veering Ln		Date of Receipt					
City Burke FEC ID number of contributing federal political committee. Name of Employer	State Zip Code VA 22015-4445 C Occupation	11 07 2013 Transaction ID : C9478002 Amount of Each Receipt this Period 50.00					
Self-Employed Receipt For: Primary General Other (specify)	Consultant Aggregate Year-to-Date ▼ 550.00						
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt					
FEC ID number of contributing federal political committee. Name of Employer	C Occupation	Amount of Each Receipt this Period					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼						
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y					
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period					
Receipt For: Primary General Other (specify) ▼	Primary General						
SUBTOTAL of Receipts This Page (optional)		50.00					
TOTAL This Period (last page this line number	r only)	3250.00					

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF 17									
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)									
••			Detailed Summary Page	11a 11b 11c 12									
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or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to solicit contributions from such committee.									
	NAME OF COMMITTEE (In Full)												
$ \rangle$	PODER PAC												
_	Full Name (Lock First Middle Initial)			T									
Δ.	Full Name (Last, First, Middle Initial) Hyatt Regency Denver			Date of Receipt									
	Mailing Address 650 15th Street			M M / D D / Y Y Y Y									
				12 04 2013									
	City	State CO	Zip Code 80220	Transaction ID : C9497993									
	Denver		00220	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		6274.70									
	Name of Employer	Occupation											
	Receipt For:	Aggregati	Veer to Date =										
	Primary General	Aggregate	Year-to-Date ▼	1									
	Other (specify) ▼												
— В.	Full Name (Last, First, Middle Initial)	Date of Receipt											
В.	Mailing Address			M M / D D / Y Y Y Y									
	City	State	Zip Code										
				Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С											
	·												
	Name of Employer	Occupation											
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General			1									
	Other (specify) ▼		A										
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt									
	Mailing Address			M = M / D = D / Y = Y = Y									
	City	State	Zip Code	_									
	City	State	Zip Code	Amount of Each Receipt this Period									
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	federal political committee.	C											
	Name of Employer O												
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	Primary General			1									
	Other (specify) ▼	1											
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S	CHEDULE B (FEC Form 3X)		FOR LINE	IE NUMBER: PAGE 10 OF 17								
IT	EMIZED DISBURSEMENTS	Use separate sche for each category		(check only	one)			~				
		Detailed Summary		X 21b 27	22	23		24 28c	25		26 20h	
_		<u> </u>			28a	28b			29		30b	
	ny information copied from such Reports and Statem for commercial purposes, other than using the name											
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	PODER PAC											
<u></u>	Full Name (Last, First, Middle Initial)											
Α.	Bernadette Cala				Date of	Disburse			Y			
	Mailing Address 1201 Janneys Lane				09 20 2013							
	City	State Zip Coc	de		Transaction ID : D508381							
	Alexandria	VA 22302			114115	action ib	. Do	00301				
	Purpose of Disbursement consulting - compliance		I		Amount	of Each	Disb	urseme	nt this	Period	b	
	Candidate Name			Category/					200	0.00	٦	
	Office Sought: House Disbursen	nent For:		Туре		-		,				
			eneral									
	President	Other (specify)										
	State: District:											
	Full Name (Last, First, Middle Initial)											
В.	CA Secretary of State				Date of	Disburse	ement					
	Mailing Address (200 to 100 to				M = M		D		2042	Υ		
	Mailing Address 1500 11th Street, Room 495				07] []	8		2013			
		State Zip Coc	de		Trans	action ID	: D5	06956				
	Sacramento Purpose of Disbursement	CA 95814										
	filing fees				Amount	of Each	Disb	urseme	nt this	Period	b	
	Candidate Name			Category/							т	
				Type		,	_	7	50	0.00	_	
	Office Sought: House Disbursen		_									
		,	eneral									
	President State: District:	Other (specify) ▼										
_	Full Name (Last, First, Middle Initial)											
C.	Hyatt Regency Denver				Date of	Disburse	ement					
					M = M	/ D	D	/ Y	ΥΥ	Υ		
	Mailing Address 650 15th Street				10	1	8		2013			
	City	State Zip Cod	de		Trans	action ID	· D5	11061				
	Denver Purpose of Disbursement	CO 80220			mans	action ib	. 55	11001				
	mtg.exp food, room rental,						D: 1					
	Candidate Name			Ontonout	Amount	of Each	DISDI	urseme	nt this	Period	ג	
				Category/ Type				_	6274	1.70		
	Office Sought: House Disbursen	nent For:						7				
		,	eneral									
		Other (specify) ▼										
_	State: District:											
_ ا								-	6524	L 70	٦	
Ľ	SUBTOTAL of Disbursements This Page (optional)			·····		-,-		7	0024		┛	
١,	OTAL This Period (last page this line number only)										1	
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 11 OF 17
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28	
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the nam	e and address of any politic	ai committee to	Solicit contribution	ons from such committee.
NAME OF COMMITTEE (In Full) PODER PAC				
Full Name (Last, First, Middle Initial)				
A. NGP Van, Inc.			Date of Disbu	
Mailing Address 1101 15th Street, NW Suite 500			09	20 2013
	state Zip Code		Transaction	ID : D509082
	DC 20005		Transaction	ID . D303002
Purpose of Disbursement campaign software			Amount of Eac	ch Disbursement this Period
Candidate Name		Category/		2400.00
Office Sought: House Disbursem	nent For:	Туре		
Senate	Primary General Other (specify) ▼			
State: District:	·			
Full Name (Last, First, Middle Initial)				
B. PNC Merchant Services			Date of Disbu	
Mailing Address One PNC Plaza			12	31 2013
,	tate Zip Code PA 15265		Transaction	ID : D518707
Pittsburgh Purpose of Disbursement	PA 15265			
credit card fees			Amount of Eac	ch Disbursement this Period
Candidate Name		Category/ Type	7	66.85
Office Sought: House Disbursem	nent For:			
	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. PNC Merchant Services			Date of Disbu	
Mailing Address One PNC Plaza			11	30 / 2013
,	tate Zip Code		Transaction	ID : D518708
	PA 15265		1141134611011	.5 . 5010100
Purpose of Disbursement credit card fees			A	ala Dialassusassas Alaia Davia d
Candidate Name		Category/ Type	Amount of Eac	ch Disbursement this Period 69.16
Office Sought: House Disbursem	nent For:	71	7	7
	Primary General			
	Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		······•	,	2536.01
TOTAL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X)	Line concrete selectivity	FOR LINE		PAGE 12 OF 17							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 26 28c 29 30							
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full) PODER PAC	is and address of any politic	a commutee to	Solicit Continuations II	om such committee.							
Full Name (Last, First, Middle Initial)			Date of Disburseme								
A. PNC Merchant Services			ent								
Mailing Address One PNC Plaza			10 31 2013								
	State Zip Code		Transaction ID : I	D518709							
	ourgh PA 15265 ose of Disbursement										
credit card fees		\Box	Amount of Each Di	sbursement this Period							
Candidate Name		Category/ Type		66.85							
	nent For: Primary General Other (specify)	Туре									
State: District:											
Full Name (Last, First, Middle Initial) B. PNC Merchant Services Mailing Address One PNC Plaza			Date of Disbursement of O9 30	ent / Y Y Y Y Y Y Y Y 2013							
,	State Zip Code PA 15265		Transaction ID :	D518710							
Purpose of Disbursement credit card fees			Amount of Each Di	sbursement this Period							
Candidate Name		Category/ Type		105.91							
	nent For: Primary General Other (specify)	71	,								
Full Name (Last, First, Middle Initial) C. PNC Merchant Services			Date of Disburseme								
Mailing Address One PNC Plaza			08 / 31	2013							
•	State Zip Code PA 15265		Transaction ID :	D518711							
credit card fees Candidate Name		Cotogony	Amount of Each Disbursement this Po								
		Category/ Type		41.21							
	nent For: Primary General Other (specify)		,	,							
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				213.97							

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S	CHEDULE B (FEC Form 3X)	FOR LINE					NUMBER: PAGE 13 OF 17								
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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam														
\setminus	NAME OF COMMITTEE (In Full)														
$ \rangle$	PODER PAC														
\angle	Full Name (Last, First, Middle Initial)														
Α.	PNC Merchant Services						Dat	e of	Disl	burse	mer	nt			
							07 31 2013								1
	Mailing Address One PNC Plaza														
	City	`toto	Zin Codo												
	City S Pittsburgh	State PA	Zip Code 15265				Tr	ansa	actio	on ID	: D	518712			
	Purpose of Disbursement		10200			_									
	credit card fees						Am	ount	of E	Each	Disl	burseme	ent this	Per	iod
	Candidate Name			C	atego	ry/							ç	32.90	
	Office Courbby House				Туре				_	7	_	7		2.50	
	Office Sought: House Disbursen Senate	nent For: Primary	General												
		Other (spe													
	State: District:	· ·	<i>37</i> , ↓												
	Full Name (Last, First, Middle Initial)														
В.	The Denver Athletic Club						Dat	e of	Disl	burse	mer	nt			
	NAME AND THE PROPERTY OF THE P							= M	/		D	/ Y	Y Y	- Y	1
	Mailing Address 1325 Glenarm Place							10		1	4		2013		ı
		State	Zip Code	Tra						on ID	: D	510927			
	Denver Purpose of Disbursement	СО	80204												
	mtg.exp room rental, food, equipment			Г			Ame	ount	of E	∃ach	Dis	burseme	ent this	Per	iod
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 14 OF 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of coliciting 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) PODER PAC Full Name (Last, First, Middle Initial) Eloise Gomez Reyes for Congress Mailing Address P.O Box 11487 City State Zip Code Candidate Name Eloise Gomez Reyes Office Sought: House Sanate President State: CA District: 31 Full Name (Last, First, Middle Initial) Friends of Renteria Mailing Address PO Box 655 City State Zip Code Candidate Name Eloise Gomez Reyes Other (specify) Transaction ID: D508023 Amount of Each Disbursement this Period Category/ Type Transaction ID: D508023 Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Transaction ID: D508023 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement Category/ Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Amount of Each Disbursement this Period Category/ Type Transaction ID: D513301 Category/ Type Transaction ID: D51301 Category/ Type Transaction ID: D51301 Category/ Type Transaction ID: D51301	SCHEDULE B (FEC Form 3X)	11	FOR LINE	FOR LINE NUMBER: PAGE 15 OF 17			
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NAME OF COMMITTEE (In Full) PODER PAC					
Full Name (Last, First, Middle Initial)					
A. David Ferreira			Date of Disburse		
Mailing Address 530 1st St SE				7 2013	
City Washington	State Zip Code DC 20003-2608		Transaction ID	: D506942	
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NAME OF COMMITTEE (In Full)					
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Annette Quijano for Assembly			Date of Disbursement		
Annette Quijano for Assembly			M M / D D / Y Y Y Y		
Mailing Address 311 WEst Henry Strett			10 29 2013		
City	State Zip Code				
Linden	NJ 07036		Transaction ID: D511499		
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3. Committee to Elect Anita Lopez			M M / D D / Y Y Y Y		
Mailing Address 1817 Madison Avenue			08 19 2013		
City	State Zip Code		Transaction ID : D508021		
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Mailing Address PO Box 1988			12 11 2013		
0"	O:				
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