

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Petri-Ribble Invitational

ADDRESS (number and street) PO Box 30844
 Check if different than previously reported. (ACC) Bethesda MD 20824

2. **FEC IDENTIFICATION NUMBER** ▼ C C00496844 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2011 through M M / D D / Y Y Y Y 09 / 30 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Emily Tadlock
Signature of Treasurer Emily Tadlock *[Electronically Filed]* Date M M / D D / Y Y Y Y 10 / 13 / 2011

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Petri-Ribble Invitational

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5000.00	15000.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5000.00	15000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	0.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	0.00	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	18904.41	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	22439.13	

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 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Petri-Ribble Invitational

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	2500.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	2500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	12500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5000.00	15000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	3904.41	3904.41
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8904.41	18904.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	0.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	0.00	0.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10000.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8904.41
25. SUBTOTAL (add Line 23 and Line 24).....	18904.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	18904.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 8
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Petri-Ribble Invitational

A. Full Name (Last, First, Middle Initial)
CSX Corporation Good Government Fund

Mailing Address 1331 Pennsylvania Avenue NW
Suite 560

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2011

Transaction ID : SA11C.4133

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 8
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Petri-Ribble Invitational

A. Full Name (Last, First, Middle Initial)
Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

FEC ID number of contributing federal political committee. **C** C00463620

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
3904.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2011

Transaction ID : SA12.4140

Amount of Each Receipt this Period
 3904.41

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3904.41

3904.41

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Petri-Ribble Invitational

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express		Nature of Debt (Purpose): Hotel Lodging Expense
Mailing Address PO Box 360001		
City	State	Zip Code
Fort Lauderdale	FL	33336-0001

Outstanding Balance Beginning This Period	Transaction ID : SD10.4134	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="689.80"/>	<input type="text" value="0.00"/>	<input type="text" value="689.80"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bank of America Visa		Nature of Debt (Purpose): Hotel Lodging Expense
Mailing Address PO Box 15710		
City	State	Zip Code
Wilmington	DE	19850-5710

Outstanding Balance Beginning This Period	Transaction ID : SD10.4136	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="691.90"/>	<input type="text" value="0.00"/>	<input type="text" value="691.90"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Financial Services		Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 30844		
City	State	Zip Code
Bethesda	MD	20824-0844

Outstanding Balance Beginning This Period	Transaction ID : SD10.4130	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1017.96"/>	<input type="text" value="0.00"/>	<input type="text" value="1017.96"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2399.66"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Petri-Ribble Invitational

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carole Goeas & Associates, LLC

Nature of Debt (Purpose):
Catering/Event Supplies/Travel

Mailing Address 1707 Prince Street
#5

City State Zip Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4128

Amount Incurred This Period

19534.91

Payment This Period

0.00

Outstanding Balance at Close of This Period

19534.91

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Debra Gebhardt

Nature of Debt (Purpose):
Reimbursed- Airfare/Transportation

Mailing Address 4707 Connecticut Avenue NW
#207

City State Zip Code
Washington DC 20008

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4126

Amount Incurred This Period

504.56

Payment This Period

0.00

Outstanding Balance at Close of This Period

504.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

20039.47

2) **TOTALS** This Period (last page this line number only) ▶

22439.13

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

22439.13