

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

Office Use Only

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

BOMAPAC

ADDRESS (number and street)

1101 15th St, NW, Suite 800

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00106435

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2010

through

09

30

2010

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

Karen Penafiel

Signature of Treasurer

Electronically Filed by Karen Penafiel

Date

10

14

2010

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

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 14

Write or Type Committee Name
BOMAPAC

Report Covering the Period: From:

M	M
0	7

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		49609.82
(b) Cash on Hand at Beginning of Reporting Period	48915.39	
(c) Total Receipts (from Line 19)	12645.25	35279.25
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61560.64	84889.07
7. Total Disbursements (from Line 31)	15721.77	39050.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45838.87	45838.87
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 14

Write or Type Committee Name

BOMAPAC

Report Covering the Period:

From:

M	M
0	7

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)	1775.00	6045.00
(ii) Unitemized	10870.00	24234.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12645.00	30279.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	12645.00	35279.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.25	0.25
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12645.25	35279.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12645.25	35279.25

DETAILED SUMMARY PAGE

of Disbursements

4 / 14

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.....	221.77	550.20	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	221.77	550.20	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15500.00	38500.00	
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))..	15721.77	39050.20	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15721.77	39050.20	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 14

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)	12645.00	35279.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12645.00	35279.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	221.77	550.20
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	221.77	550.20

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

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

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

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

BOMAPAC

A.

Full Name (Last, First, Middle Initial)

Phil Belling

Mailing Address 2695 Bayshore Dr.

City

Newport Beach

State

CA

Zip Code

92663

FEC ID number of contributing
federal political committee.

C

Name of Employer
LBA Realty

Occupation

Property Management

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C968664

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Henry Chamberlain

Mailing Address 5910 Calla Dr

City

McLean

State

VA

Zip Code

22101-3307

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOMA International

Occupation

President

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

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

Transaction ID: C968679

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Elisabeth Hensley

Mailing Address 313 Plum Drive

City

Austin

State

TX

Zip Code

78734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Texas Medical Association

Occupation

Director, Property Management

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: C947313

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 14

(check only one)

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

BOMAPAC

A.

Full Name (Last, First, Middle Initial)

Elisabeth Hensley

Mailing Address 313 Plum Drive

City

Austin

State

TX

Zip Code

78734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Texas Medical Association

Occupation

Director, Property Management

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: C947322

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ray Mackey

Mailing Address 5427 Harbor Town Drive

City

Dallas

State

TX

Zip Code

75287

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stream realty Partners,
LP

Occupation

COO, Real Estate Mgmt

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: C968665

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Karrie McCampbell

Mailing Address 242 Canyon Valley

City

Richardson

State

TX

Zip Code

75080

FEC ID number of contributing
federal political committee.

C

Name of Employer
Transwestern

Occupation

Property manager

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C947300

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 14

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

BOMAPAC

A.

Full Name (Last, First, Middle Initial)

James A. Peck

Mailing Address 3505 Stardust Dr. NE

City

Albuquerque

State

NM

Zip Code

87110-4163

FEC ID number of contributing
federal political committee.

C

Name of Employer
CB Richard Ellis

Occupation

Senior Director- Asset Services

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C968743

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Catherine A. Pullen

Mailing Address 95 Diamond Rock Rd
Ste 120

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fox Realty Co.

Occupation

Senior Vice President

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: C968685

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Boyd R. Zoccola

Mailing Address 201 W 103rd St.
STE 400

City

Indianapolis

State

IN

Zip Code

46290

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hokanson Companies Inc.

Occupation

Vice President

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C968686

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

550.00

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 / 14

(check only one)

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

BOMAPAC

A.

Full Name (Last, First, Middle Initial)

Boyd R. Zoccola

Mailing Address 201 W 103rd St.
STE 400

City State Zip Code
Indianapolis IN 46290

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hokanson Companies Inc.

Occupation
Vice President

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C968566

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

1775.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 14

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

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

NAME OF COMMITTEE (In Full)
BOMAPAC**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 2965 West Corporate Lakes Blvd

City State Zip Code
Weston FL 33331Purpose of Disbursement
credit card fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D107829

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	0

Amount of Each Disbursement this Period

4.95

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 2965 West Corporate Lakes Blvd

City State Zip Code
Weston FL 33331Purpose of Disbursement
credit card fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D107832

Date of Disbursement

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

Amount of Each Disbursement this Period

27.80

C.

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address P.O.Box 622227

City State Zip Code
Orlando FL 32862-2227Purpose of Disbursement
Account Analysis Fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D107823

Date of Disbursement

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

Amount of Each Disbursement this Period

34.01

SUBTOTAL of Disbursements This Page (optional)

66.76

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 11 / 14

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

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

NAME OF COMMITTEE (In Full)
BOMAPAC

A.

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address P.O.Box 622227

City
Orlando

State
FL

Zip Code
32862-2227

Purpose of Disbursement

Bank fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D107824

Date of Disbursement

08 / 10 / 2010

Amount of Each Disbursement this Period

114.47

B.

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address P.O.Box 622227

City
Orlando

State
FL

Zip Code
32862-2227

Purpose of Disbursement

Account Analysis Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D107827

Date of Disbursement

08 / 19 / 2010

Amount of Each Disbursement this Period

23.59

C.

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address P.O.Box 622227

City
Orlando

State
FL

Zip Code
32862-2227

Purpose of Disbursement

Account Analysis Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D107828

Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

16.95

SUBTOTAL of Disbursements This Page (optional)

155.01

TOTAL This Period (last page this line number only)

221.77

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 / 14

<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

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)
BOMAPAC**A.** Full Name (Last, First, Middle Initial)
ALLYSON SCHWARTZ FOR CONGRESS

Mailing Address P.O. Box 2232

City State Zip Code
Jenkintown PA 19046Purpose of Disbursement
General election contributionCandidate Name
Rep. Allyson Y. SchwartzCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 13

Transaction ID: D105969

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

B. Full Name (Last, First, Middle Initial)
FRIENDS OF DAVE REICHERT

Mailing Address P. O. Box 53322

City State Zip Code
Bellevue WA 98015Purpose of Disbursement
general election contributionCandidate Name
Rep. Dave ReichertCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: WA District: 08

Transaction ID: D105964

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

C. Full Name (Last, First, Middle Initial)
Rep. Ed Perlmutter

Mailing Address 415 CHOB

City State Zip Code
Washington DC 20515-0607Purpose of Disbursement
General election contributionCandidate Name
Rep. Ed PerlmutterCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 07

Transaction ID: D105972

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00									
---------	--	--	--	--	--	--	--	--	--

SUBTOTAL of Disbursements This Page (optional)

4500.00

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)

PAGE 13 / 14

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

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

NAME OF COMMITTEE (In Full)
BOMAPAC

A. Full Name (Last, First, Middle Initial)
GARY MILLER FOR CONGRESS

Mailing Address 721 S. Brea Canyon Road, Suite 7

City State Zip Code
Diamond Bar CA 91789

Purpose of Disbursement
General election contribution

Candidate Name
Rep. Gary G. Miller

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 42

Transaction ID: D105967

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address P.O. Box 8277

City State Zip Code
The Woodlands TX 77387

Purpose of Disbursement
general election contribution

Candidate Name
Rep. Kevin Brady

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 08

Transaction ID: D105963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Rep. Michael Turner

Mailing Address 1740 LHOB

City State Zip Code
Washington DC 20515-3503

Purpose of Disbursement
general election contribution

Candidate Name
Rep. Michael Turner

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 03

Transaction ID: D105965

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 14 / 14

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

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

NAME OF COMMITTEE (In Full)
BOMAPAC

A. Full Name (Last, First, Middle Initial)
MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City State Zip Code
LOUISVILLE KY 40201

Purpose of Disbursement
Primary (2014) election contribution

Candidate Name
Sen. Mitch McConnell

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼
 State: KY District: 00

Transaction ID: D105971

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
MENENDEZ FOR SENATE

Mailing Address ONE GATEWAY CENTER SUITE 520

City State Zip Code
NEWARK NJ 07102

Purpose of Disbursement
General Election Contribution

Candidate Name
Sen. Robert Menendez

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼
 State: NJ District: 00

Transaction ID: D105970

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

15500.00