



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="88321.86"/>	<input type="text" value="88321.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="132501.86"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="16195.00"/>	<input type="text" value="126875.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="148696.86"/>	<input type="text" value="215196.86"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11000.00"/>	<input type="text" value="77500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="137696.86"/>	<input type="text" value="137696.86"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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

Write or Type Committee Name

**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

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

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).....	15970.00	119305.00
(ii) Unitemized .....	225.00	2570.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16195.00	121875.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	16195.00	121875.00
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (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))..... ▶	16195.00	126875.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16195.00	126875.00

**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
21. Operating Expenditures:		
(a) Allocated 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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	77500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	11000.00	77500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11000.00	77500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	16195.00	121875.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16195.00	121875.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(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)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Coleman**

Mailing Address PO Box 1308 335 Mill Road

City Lewiston State ID Zip Code 83501-1308

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

Name of Employer Coleman Oil Company Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2710.00

Date of Receipt  
 06 / 12 / 2013  
**Transaction ID : SA11AI.6240**

Amount of Each Receipt this Period  
 210.00

Full Name (Last, First, Middle Initial)  
**B. Sami Dabbas**

Mailing Address 344 Mira Loma Avenue

City Glendale State CA Zip Code 91204

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

Name of Employer McWhirter Distributing Company Occupation COO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 460.00

Date of Receipt  
 06 / 24 / 2013  
**Transaction ID : SA11AI.6247**

Amount of Each Receipt this Period  
 260.00

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

Mailing Address 2360 Lindbergh Street

City Auburn State CA Zip Code 95602-9562

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

Name of Employer Nella Oil Company Occupation General Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 06 / 20 / 2013  
**Transaction ID : SA11AI.6246**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1470.00

**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 7 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial) <b>A. Greg Gilkerson</b>		Date of Receipt MM / DD / YYYY 06 / 21 / 2013 <b>Transaction ID : SA11AI.6244</b>
Mailing Address 3407 S 31st Street, Suite 200		Amount of Each Receipt this Period 1500.00
City Temple	State TX	Zip Code 76502-1944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Professional Datasolutions, In	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Ken Gunn</b>		Date of Receipt MM / DD / YYYY 06 / 17 / 2013 <b>Transaction ID : SA11AI.6242</b>
Mailing Address 10430 231st Street SW		Amount of Each Receipt this Period 1000.00
City Edmonds	State WA	Zip Code 98020-5105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Califber Consulting	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Leo Liebowitz</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2013 <b>Transaction ID : SA11AI.6237</b>
Mailing Address 125 Jericho Turnpike Suite 10		Amount of Each Receipt this Period 5000.00
City Jericho	State NY	Zip Code 11753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Getty Realty	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 12  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial)  
**A. Tom E Love**

Mailing Address PO Box 26210

City State Zip Code  
 Oklahoma City OK 73216

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

Name of Employer Occupation  
 Love's Travel Stops & Country CEO & Chairman

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : SA11AI.6245**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. Thomas Schmidt**

Mailing Address 425 Better Way

City State Zip Code  
 Appleton WI 54915

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

Name of Employer Occupation  
 U.S. Venture CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11AI.6248**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 2101 St. Ritas Lane

City State Zip Code  
 Buffalo NY 14221

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

Name of Employer Occupation  
 Schmitt Sales CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2013

**Transaction ID : SA11AI.6239**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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

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NAME OF COMMITTEE (In Full)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard Spresser**

Mailing Address 5600 S. Quebec, Suite 335A

City State Zip Code  
 Greenwood Village CO 80111

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

Name of Employer Occupation  
 Pester Marketing President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : SA11AI.6243**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**B. Jon D Stewart**

Mailing Address 2211 West Bradley

City State Zip Code  
 Champaign IL 61821

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

Name of Employer Occupation  
 Tri Star President & CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2013

**Transaction ID : SA11AI.6241**

Amount of Each Receipt this Period  
 500.00

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15970.00

**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)

<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)

**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial)

**A. Ann Wagner for Congress**

Mailing Address 150 Long Rd  
Suite 50

City Chesterfield State MO Zip Code 63005

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2013			

**Transaction ID : SB23.6260**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Billy Long for Congress**

Mailing Address P.O. Box 368

City Falls Church State VA Zip Code 22040

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			06			2013			

**Transaction ID : SB23.6255**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO RE-ELECT LINDA SANCHEZ**

Mailing Address 1212 S. VICTORY BLVD

City BURBANK State CA Zip Code 91502

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: CA District: 39

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2013			

**Transaction ID : SB23.6257**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4500.00
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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
<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)

**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial)

**A. CONGRESSMAN JOE BARTON COMMITTEE, THE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2013

Mailing Address P.O. Box 1444

**Transaction ID : SB23.6258**

City Ennis State TX Zip Code 75120

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: TX District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. CONYERS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2013

Mailing Address PO BOX 70980

**Transaction ID : SB23.6256**

City WASHINGTON State DC Zip Code 20024

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Friends of Jim Inhofe**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2013

Mailing Address 406 Virginia Avenue

**Transaction ID : SB23.6251**

City Alexandria State VA Zip Code 22302

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

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

4500.00
---------

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

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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
<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)

**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Full Name (Last, First, Middle Initial)

**A. JEFF MERKLEY FOR OREGON**

Mailing Address 2236 SE 10TH AVE

City PORTLAND State OR Zip Code 97214

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: OR District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

Transaction ID : SB23.6259

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Upton For All of Us**

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: MI District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2013

Transaction ID : SB23.6252

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2000.00
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11000.00
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