

# 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

Continuing A Majority Party Action Committee (CAMPAC)

ADDRESS (number and street) 5915 Eastman Avenue Suite 100

Check if different than previously reported. (ACC) Midland MI 48640

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00350462

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:
- |   |                                      |                                       |  |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2)            | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3)            | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE**-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post**-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 03 01 2011 through 03 31 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 Jacqueline M. Medema

Signature of Treasurer Electronically Filed by Jacqueline M. Medema Date 04 20 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.

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

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

Write or Type Committee Name  
Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		158525.31
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	89706.22									
(c) Total Receipts (from Line 19) .....	77514.34	77555.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	167220.56	236080.93								
7. Total Disbursements (from Line 31) .....	31167.79	100028.16								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	136052.77	136052.77								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	3500.00	3500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3500.00	3500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	74000.00	74000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	77500.00	77500.00
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.) .....	14.34	55.62
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)) .....	77514.34	77555.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	77514.34	77555.62

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.....	6167.79	45028.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6167.79	45028.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	25000.00	55000.00
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))..	31167.79	100028.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31167.79	100028.16

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) .....	77500.00	77500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	77500.00	77500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6167.79	45028.16
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6167.79	45028.16

**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 6 / 22</span>
	(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"/> 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)  
Continuing A Majority Party Action Committee (CAMPAC)

**A.**

Full Name (Last, First, Middle Initial) TIMOTHY J. KELLOGG		Date of Receipt MM / DD / YYYY 03 / 28 / 2011
Mailing Address 9660 SCHLAPP RD		<b>Transaction ID:</b> SA11AI.9374
City YORKVILLE	State IL	Zip Code 60560
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer SPIRIT FAMILY FARMS	Occupation BUSINESS DEVELOPMENT MANAGER	DONATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) GREGORY S. NICKERSON		Date of Receipt MM / DD / YYYY 03 / 14 / 2011
Mailing Address 11215 MARWOOD HILL DR.		<b>Transaction ID:</b> SA11AI.9367
City POTOMAC	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer ANGUS NICKERSON	Occupation PRINCIPAL	DONATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3500.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 22  
(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)  
Continuing A Majority Party Action Committee (CAMPAC)

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

Mailing Address 100 Abbott Park Rd.  
D312 AP6D

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 ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2011

**Transaction ID:** SA11C.9377

Amount of Each Receipt this Period  
2000.00

DONATION

**B.** Full Name (Last, First, Middle Initial)  
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW  
8th Floor

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2011

**Transaction ID:** SA11C.9355

Amount of Each Receipt this Period  
5000.00

DONATION

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

Mailing Address 120 Park Avenue

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2011

**Transaction ID:** SA11C.9378

Amount of Each Receipt this Period  
5000.00

DONATION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12000.00**

**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 / 22  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Continuing A Majority Party Action Committee (CAMPAC)

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2011

Transaction ID: SA11C.9356

Amount of Each Receipt this Period  
5000.00

DONATION

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY OF ANESTHESIOLOGISTS INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City State Zip Code  
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2011

Transaction ID: SA11C.9369

Amount of Each Receipt this Period  
5000.00

DONATION

**C.** Full Name (Last, First, Middle Initial)  
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th St NW  
Suite 600 West

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2011

Transaction ID: SA11C.9371

Amount of Each Receipt this Period  
5000.00

DONATION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

**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 9 / 22
	<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)  
Continuing A Majority Party Action Committee (CAMPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) BLUE CROSS AND BLUE SHIELD OF MICHIGAN POLITICAL ACTION COMMITTEE (BCBSM PAC)	Date of Receipt MM / DD / YYYY 03 / 14 / 2011
	Mailing Address 600 LAFAYETTE EAST -#1920	Transaction ID: SA11C.9357
	City State Zip Code DETROIT MI 48226	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00084061	DONATION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 03 / 09 / 2011
	Mailing Address 1201 F Street, NW Suite 450 Suite 300	Transaction ID: SA11C.9354
	City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00111559	DONATION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) DYKEMA GOSSETT FEDERAL PAC	Date of Receipt MM / DD / YYYY 03 / 14 / 2011
	Mailing Address 800 MICHIGAN NATIONAL TOWER	Transaction ID: SA11C.9358
	City State Zip Code LANSING MI 48933	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00342113	DONATION
	Name of Employer Occupation 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) .....	15000.00
<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 10 / 22  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Continuing A Majority Party Action Committee (CAMPAC)

**A.** Full Name (Last, First, Middle Initial)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City State Zip Code  
INDIANAPOLIS IN 46285

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

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
0	3	/	1	4	/	2	0	1	1

**Transaction ID:** SA11C.9359

Amount of Each Receipt this Period  
5000.00

DONATION

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

Mailing Address 1726 M STREET, NW SUITE 501

City State Zip Code  
WASHINGTON DC 20036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

**Transaction ID:** SA11C.9360

Amount of Each Receipt this Period  
2000.00

DONATION

**C.** Full Name (Last, First, Middle Initial)  
HSBC NORTH AMERICA POLITICAL ACTION COMMITTEE (H-PAC)

Mailing Address 26525 N. Riverwoods Blvd.

City State Zip Code  
Mettawa IL 60045

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

**Transaction ID:** SA11C.9376

Amount of Each Receipt this Period  
2000.00

DONATION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9000.00**

**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 11 / 22  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Continuing A Majority Party Action Committee (CAMPAC)

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

Mailing Address 1776 EYE STREET NW  
Suite 890

City State Zip Code  
Washington DC 20006

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

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
0	3	/	3	1	/	2	0	1	1

**Transaction ID:** SA11C.9379

Amount of Each Receipt this Period  
2500.00

DONATION

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

Mailing Address 655 15th Street NW Suite 445

City State Zip Code  
Washington DC 20005

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

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
0	3	/	2	3	/	2	0	1	1

**Transaction ID:** SA11C.9370

Amount of Each Receipt this Period  
5000.00

DONATION

**C.** Full Name (Last, First, Middle Initial)  
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive  
Suite 300

City State Zip Code  
Arlington VA 22202

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

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
0	3	/	2	1	/	2	0	1	1

**Transaction ID:** SA11C.9372

Amount of Each Receipt this Period  
2500.00

DONATION

**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 12 / 22

(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)  
Continuing A Majority Party Action Committee (CAMPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND		Date of Receipt
	Mailing Address 800 N. LINDBERGH BLVD.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	ST. LOUIS	MO	63167
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
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="5000.00"/>	DONATION

<b>B.</b>	Full Name (Last, First, Middle Initial) SOLAR ENERGY INDUSTRIES ASSOCIATION PAC		Date of Receipt
	Mailing Address 575 7TH STREET #400		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	WASHINGTON	DC	20004
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	DONATION

<b>C.</b>	Full Name (Last, First, Middle Initial) T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)		Date of Receipt
	Mailing Address 401 9th STREET NW SUITE 550		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	WASHINGTON	DC	20004
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	DONATION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="9000.00"/>
<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 13 / 22
	(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)  
Continuing A Majority Party Action Committee (CAMPAC)

**A.**

Full Name (Last, First, Middle Initial)  
WAL-MART STORES INC PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8TH STREET

City State Zip Code  
BENTONVILLE AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2011

Transaction ID: SA11C.9382

Amount of Each Receipt this Period  
2000.00

DONATION

**B.**

Full Name (Last, First, Middle Initial)  
YUM BRANDS INC. GOOD GOVERNMENT FUND

Mailing Address 1441 GARDINER LANE  
3RD FLOOR MAIL STOP L2230

City State Zip Code  
LOUISVILLE KY 40213

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2011

Transaction ID: SA11C.9364

Amount of Each Receipt this Period  
2000.00

DONATION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	74000.00

# 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 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)  
Continuing A Majority Party Action Committee (CAMPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>ANDREWS HOOPER &amp; PAVLIK PLC</b>	<b>Transaction ID:</b> SB21B.9386 Date of Disbursement 03 / 18 / 2011	
	Mailing Address 5915 EASTMAN AVE STE 100		
	City MIDLAND State MI Zip Code 48640	Amount of Each Disbursement this Period 227.00	
	Purpose of Disbursement ACCOUNTING FEES Candidate Name	001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>ANDREWS HOOPER &amp; PAVLIK PLC</b>	<b>Transaction ID:</b> SB21B.9393 Date of Disbursement 03 / 25 / 2011	
	Mailing Address 5915 EASTMAN AVE STE 100		
	City MIDLAND State MI Zip Code 48640	Amount of Each Disbursement this Period 262.00	
	Purpose of Disbursement ACCOUNTING FEES Candidate Name	001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>THE LEVANTINO GROUP</b>	<b>Transaction ID:</b> SB21B.9387 Date of Disbursement 03 / 18 / 2011	
	Mailing Address 2501 WISCONSIN AVE NW SUITE 304		
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 5678.79	
	Purpose of Disbursement FUNDRAISING EXPENSES, ITEMIZED BELOW Candidate Name	003 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6167.79</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.9387**

THESE COSTS ARE FOR EXPENSES INCURRED ON BEHALF OF CAMPAC AND ARE NOT COSTS ASSOCIATED WITH ANY INDIVIDUAL CANDIDATE

**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 16 / 22

<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)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

SUSAN GAGE CATERERS

Mailing Address 7411 LIVINGSTON RD

City OXON HILL State MD Zip Code 20745

Purpose of Disbursement  
CATERING FOR EVENT

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.9387.0

Date of Disbursement

03 / 18 / 2011

Amount of Each Disbursement this Period

5579.99

[MEMO ITEM]

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

0.00

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

6167.79



**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)  
Continuing A Majority Party Action Committee (CAMPAC)

A.	Full Name (Last, First, Middle Initial) ANN MARIE BUERKLE FOR CONGRESS	Transaction ID: SB23.9397
	Mailing Address 3779 Underwood Way	Date of Disbursement 03 / 28 / 2011
	City Syracuse State NY Zip Code 13215	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION TO CANDIDATE	011 Category/ Type
	Candidate Name ANN MARIE BUERKLE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BENISHEK FOR CONGRESS	Transaction ID: SB23.9385
	Mailing Address 802 Pentoga Trail	Date of Disbursement 03 / 09 / 2011
	City Crystal Falls State MI Zip Code 49920	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement RETIRE DEBT - 2010 PRIMARY	011 Category/ Type
	Candidate Name DANIEL J BENISHEK	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DIANE BLACK FOR CONGRESS	Transaction ID: SB23.9403
	Mailing Address 819 PLANTATION BLVD	Date of Disbursement 03 / 28 / 2011
	City GALLATIN State TN Zip Code 37066	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION TO CANDIDATE	011 Category/ Type
	Candidate Name DIANE LYNN BLACK	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<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)  
Continuing A Majority Party Action Committee (CAMPAC)

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF NAN HAYWORTH

Mailing Address P. O. Box 189

City Mount Kisco State NY Zip Code 10549

Purpose of Disbursement  
CONTRIBUTION TO CANDIDATE

Candidate Name  
NAN HAYWORTH

Office Sought:  House  
 Senate  
 President

State: NY District: 19

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9395

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

Mailing Address PO Box 701

City Gainesville State GA Zip Code 30503

Purpose of Disbursement  
2010 SPECIAL RUN-OFF-DEBT RETIREMENT

Candidate Name  
JOHN THOMAS JR GRAVES

Office Sought:  House  
 Senate  
 President

State: GA District: 09

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Runoff

Transaction ID: SB23.9384

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

Mailing Address PO BOX 1614

City RIDGEFIELD State WA Zip Code 98642

Purpose of Disbursement  
CONTRIBUTION TO CANDIDATE

Candidate Name  
JAIME LYNN HERRERA

Office Sought:  House  
 Senate  
 President

State: WA District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.9404

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

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

B. Form/Schedule : **SB23**  
Transaction ID : **SB23.9384**

PLEASE NOTE THERE WERE NO EXCESS CONTRIBUTIONS MADE TO GRAVES (TOM) FOR CONGRESS BY  
2010 ELECTION. THIS CONTRIBUTION OF \$5,000 IS TO RETIRE DEBT FOR THE SPECIAL RUN-OFF ELECT  
6/8/10. PREVIOUSLY FOR THE 2010 ELECTION CYCLE, CAMPAC CONTRIBUTED THE FOLLOWING AMOUNT  
(TOM) FOR CONGRESS FOR THE 2010 ELECTION CYCLE: \$5,000 TO PRIMARY ELECTION HELD 7/00/10 AN  
TO PRIMARY RUN-OFF HELD 08/10/10.

**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 / 22

<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)  
Continuing A Majority Party Action Committee (CAMPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) KRISTI FOR CONGRESS</p> <p>Mailing Address PO Box 852</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement CONTRIBUTION TO CANDIDATE</p> <p>Candidate Name KRISTI LYNN NOEM</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.9401</p> <p>Date of Disbursement 03 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MARTHA ROBY FOR CONGRESS</p> <p>Mailing Address PO Box 195</p> <p>City Montgomery State AL Zip Code 36101</p> <p>Purpose of Disbursement CONTRIBUTION TO CANDIDATE</p> <p>Candidate Name MARTHA ROBY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.9394</p> <p>Date of Disbursement 03 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MONTANANS FOR REHBERG</p> <p>Mailing Address PO BOX 1597</p> <p>City HELENA State MT Zip Code 59624</p> <p>Purpose of Disbursement CONTRIBUTION TO CANDIDATE</p> <p>Candidate Name DENNIS R REHBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.9406</p> <p>Date of Disbursement 03 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

3000.00

**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)  
Continuing A Majority Party Action Committee (CAMPAC)

**A.** Full Name (Last, First, Middle Initial)  
**RENEE ELLMERS FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 904

City DUNN State NC Zip Code 28335

Purpose of Disbursement  
CONTRIBUTION TO CANDIDATE

Candidate Name  
RENEE JACISIN ELLMERS

Office Sought:  House  
 Senate  
 President

State: NC District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.9398

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

Mailing Address PO BOX 1566

City ORLANDO State FL Zip Code 32802

Purpose of Disbursement  
CONTRIBUTION TO CANDIDATE

Candidate Name  
SANDY ADAMS

Office Sought:  House  
 Senate  
 President

State: FL District: 24

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.9396

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

Mailing Address 3339 Harrison Ave.  
3014 Harrison Ave.

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement  
CONTRIBUTION TO CANDIDATE

Candidate Name  
STEVE CHABOT

Office Sought:  House  
 Senate  
 President

State: OH District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.9409

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**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 22 / 22

<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)  
Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial)  
VICKY HARTZLER FOR CONGRESS

Mailing Address PO BOX 531

City HARRISONVILLE State MO Zip Code 64701

Purpose of Disbursement  
CONTRIBUTION TO CANDIDATE

Candidate Name  
VICKY JO HARTZLER

Office Sought:  House  
 Senate  
 President

State: MO District: 04

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.9402

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2011

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

2500.00