



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

Write or Type Committee Name  
ORRINPAC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

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 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		63136.16
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	149206.33									
(c) Total Receipts (from Line 19) .....	36732.00	416077.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	185938.33	479213.66								
7. Total Disbursements (from Line 31) .....	33794.78	327070.11								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	152143.55	152143.55								
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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
ORRINPAC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

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) .....	21275.00	200045.00
(ii) Unitemized .....	457.00	41282.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	21732.00	241327.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	15000.00	174750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	36732.00	416077.50
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.) .....	0.00	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 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)) .....	36732.00	416077.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36732.00	416077.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	27294.78	145570.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	27294.78	145570.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	165000.00
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) .....	1000.00	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	1000.00	1000.00
29. Other Disbursements.....	500.00	15500.00
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))..	33794.78	327070.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33794.78	327070.11

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	36732.00	416077.50
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35732.00	415077.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27294.78	145570.11
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	27294.78	145570.11

**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 6 / 28
	<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)  
ORRINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) DANA K. ANDERSON	Date of Receipt MM / DD / YYYY 08 / 18 / 2010
	Mailing Address 401 WILSHIRE BLVD, STE. 700	<b>Transaction ID:</b> 00818.C3793
	City State Zip Code SANTA MONICA CA 90401	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer MACERICH	Occupation VICE CHAIRMAN OF THE BOARD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) HAVEN J. BARLOW	Date of Receipt MM / DD / YYYY 08 / 10 / 2010
	Mailing Address 377 NORTH MAIN	<b>Transaction ID:</b> 00813.C3760
	City State Zip Code LAYTON UT 84041	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer BARLOW INSURANCE	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) LYNNEA BEACHT	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 10855 S. RIVERFRONT PKWY, STE 100	<b>Transaction ID:</b> 00813.C3756
	City State Zip Code SOUTH JORDAN UT 84095	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer MONAVIE	Occupation ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2250.00
<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 7 / 28  
(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

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NAME OF COMMITTEE (In Full)  
**ORRINPAC**

**A.** Full Name (Last, First, Middle Initial)  
**CLAY BROADBENT**

Mailing Address **1785 EAST 1400 NORTH**

City **LOGAN** State **UT** Zip Code **84341**

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

Name of Employer Information Requested: \_\_\_\_\_ Occupation Information Requested: \_\_\_\_\_

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt: MM / DD / YYYY  
**08 / 12 / 2010**

**Transaction ID: 00813.C3765**

Amount of Each Receipt this Period: 1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**LESLIE K. BURT**

Mailing Address **1055 SOUTH 1650 EAST**

City **BOUNTIFUL** State **UT** Zip Code **84010**

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

Name of Employer Information Requested: **BURT BROTHERS TIRE** Occupation Information Requested: **OWNER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: MM / DD / YYYY  
**08 / 12 / 2010**

**Transaction ID: 00813.C3769**

Amount of Each Receipt this Period: 500.00

Receipt

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

Mailing Address **2301 SOUTH 300 WEST**

City **SALT LAKE CITY** State **UT** Zip Code **84115**

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

Name of Employer Information Requested: **R.C. WILLEYS** Occupation Information Requested: **RETAILER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: MM / DD / YYYY  
**08 / 02 / 2010**

**Transaction ID: 00813.C3750**

Amount of Each Receipt this Period: 500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 2500.00

**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 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ORRINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) ARTHUR M. COPPOLA	Date of Receipt MM / DD / YYYY 08 / 18 / 2010
	Mailing Address P. O. BOX 2172	<b>Transaction ID:</b> 00818.C3794
	City State Zip Code SANTA MONICA CA 90407-2172	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Occupation MACERICH CHAIRMAN OF THE BOARD & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) C. A. FERRIN, JR.	Date of Receipt MM / DD / YYYY 08 / 02 / 2010
	Mailing Address 910 DONNER WAY, #301	<b>Transaction ID:</b> 00813.C3751
	City State Zip Code SALT LAKE CITY UT 84108-4119	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Occupation N/A RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT HENRIE	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 837 E. SOUTH TEMPLE	<b>Transaction ID:</b> 00813.C3754
	City State Zip Code SALT LAKE CITY UT 84102	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
	Name of Employer Occupation R&R PARTNERS PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2250.00
<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 9 / 28  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
CLIFF HOLT

Mailing Address 2233 MALAGA AVE

City State Zip Code  
SANTA CLARA UT 84765

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

Name of Employer Occupation  
BEST EFFORTS USED BEST EFFORTS USED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

**Transaction ID:** 00813.C3782

Amount of Each Receipt this Period  
275.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
J. CLINTON KELLY

Mailing Address 3495 LITTLE TREE RD

City State Zip Code  
SALT LAKE CITY UT 84108

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

**Transaction ID:** 00813.C3764

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 3495 LITTLE TREE RD

City State Zip Code  
SALT LAKE CITY UT 84108

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

**Transaction ID:** 00813.C3779

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00

**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 10 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ORRINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL LEAVITT	Date of Receipt MM / DD / YYYY 08 / 12 / 2010
	Mailing Address 299 S. MAIN, STE 2400	Transaction ID: 00816.C3791
	City State Zip Code SALT LAKE CITY UT 84111	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Memo
	Name of Employer LEAVITT PARTNERS LLC Occupation CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 0.00	<b>[MEMO ITEM]</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) LEAVITT PARTNERS LLC	Date of Receipt MM / DD / YYYY 08 / 12 / 2010
	Mailing Address 299 S. MAIN, STE 2400	Transaction ID: 00813.C3776
	City State Zip Code SALT LAKE CITY UT 84111	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ANDREW K. MALONEY	Date of Receipt MM / DD / YYYY 08 / 09 / 2010
	Mailing Address 304 E STREET NE	Transaction ID: 00915.C3796
	City State Zip Code WASHINGTON DC 20002	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer OGILVY GOVERNMENT RELATIONS Occupation LOBBYIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<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 11 / 28  
(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			

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.**

Full Name (Last, First, Middle Initial) RICH McKEOWN		Date of Receipt MM / DD / YYYY 08 / 12 / 2010
Mailing Address 299 S. MAIN, STE 2400		Transaction ID: 00816.C3792
City SALT LAKE CITY	State UT	Zip Code 84111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer LEAVITT PARTNERS LLC	Occupation PRESIDENT & CEO	Memo  <b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

**B.**

Full Name (Last, First, Middle Initial) PAUL NELSON		Date of Receipt MM / DD / YYYY 08 / 12 / 2010
Mailing Address 575 EAST 100 SOUTH		Transaction ID: 00813.C3789
City BOUNTIFUL	State UT	Zip Code 84010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) CHARLES R. NORTON		Date of Receipt MM / DD / YYYY 08 / 30 / 2010
Mailing Address 1556 N. RIDGEVIEW CIR		Transaction ID: 00915.C3803
City FARMINGTON	State UT	Zip Code 84025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer TRINITY INDUSTRIES	Occupation BUSINESSMAN	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1250.00</b>
<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: (check only one)	PAGE 12 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ORRINPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) NORMAN W. OLSEN	Date of Receipt MM / DD / YYYY 08 / 12 / 2010
	Mailing Address 2051 NORMANDY WOODS CT	<b>Transaction ID:</b> 00813.C3770
	City State Zip Code SALT LAKE CITY UT 84117	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN J. ONEILL	Date of Receipt MM / DD / YYYY 08 / 24 / 2010
	Mailing Address 912 F STREET, NW, #701	<b>Transaction ID:</b> 00915.C3801
	City State Zip Code WASHINGTON DC 20004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DON PEAY	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 4477 S. SUNSET CIR	<b>Transaction ID:</b> 00813.C3757
	City State Zip Code BOUNTIFUL UT 84010	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<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 13 / 28  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.**

Full Name (Last, First, Middle Initial)  
TERRY PITTS

Mailing Address 1440 NORTH 1400 EAST

City State Zip Code  
HEBER CITY UT 84032

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: 00813.C3763

Amount of Each Receipt this Period  
250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
TERRY PITTS

Mailing Address 1440 NORTH 1400 EAST

City State Zip Code  
HEBER CITY UT 84032

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: 00813.C3762

Amount of Each Receipt this Period  
25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
WALTER J. PLUMB

Mailing Address 90 SOUTH 400 WEST, STE 360

City State Zip Code  
SALT LAKE CITY UT 84101

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: 00813.C3774

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1275.00**

**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 14 / 28  
(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

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.**

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

Mailing Address P. O. BOX 730

City State Zip Code  
NEW VERNON NJ 07976

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

Name of Employer Occupation  
SELF EMPLOYED CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: 00915.C3800

Amount of Each Receipt this Period  
1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL SIBBETT

Mailing Address 3910 SADDLEBACK RD

City State Zip Code  
PARK CITY UT 84098-4815

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

Name of Employer Occupation  
EAGLE CREEK RANCH RANCHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2010

Transaction ID: 00813.C3753

Amount of Each Receipt this Period  
250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
SCOTT SIMPSON

Mailing Address 42 W. CENTER ST

City State Zip Code  
KAYSVILLE UT 84037

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

Name of Employer Occupation  
Utah League Of Credit Unions PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: 00813.C3785

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

**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 15 / 28  
(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)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
SCOTT SIMPSON

Mailing Address 42 W. CENTER ST

City State Zip Code  
KAYSVILLE UT 84037

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

Name of Employer Occupation  
Utah League Of Credit Uni- PRESIDENT  
ons

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: 00813.C3766

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
JODIE E. SMART

Mailing Address 1731 E. HIDDEN VALLEY CLUB DR

City State Zip Code  
SANDY UT 84092

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

Transaction ID: 00813.C3752

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address P.O. BOX 40

City State Zip Code  
GUNLOCK UT 84733

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

Name of Employer Occupation  
Information Requested INFO REQUESTED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: 00813.C3767

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2500.00

**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 16 / 28
	(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

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.**

Full Name (Last, First, Middle Initial) SPENCER STOKES		Date of Receipt MM / DD / YYYY 08 / 12 / 2010
Mailing Address 4259 SKYLINE DR		<b>Transaction ID:</b> 00813.C3775
City OGDEN	State UT	Zip Code 84403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer STOKES STRATEGIES	Occupation CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

**B.**

Full Name (Last, First, Middle Initial) CHARLES R. WARREN		Date of Receipt MM / DD / YYYY 08 / 12 / 2010
Mailing Address P.O. BOX 17819		<b>Transaction ID:</b> 00813.C3768
City SALT LAKE CITY	State UT	Zip Code 84117-0189
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF EMPLOYED	Occupation CONSULTANT	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2100.00
<b>TOTAL</b> This Period (last page this line number only) .....	21275.00

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

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

FOR LINE NUMBER: PAGE 17 / 28  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
ENERGYSOLUTIONS FUND FOR EFF. GOV.  
Mailing Address 900 17TH ST. NW, STE. 1050

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00387878

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

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

**Transaction ID:** 00813.C3745  
 Amount of Each Receipt this Period  
1500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
GENERAL ELECTRIC COMPANY PAC  
Mailing Address 1299 PENNSYLVANIA AVE, NW, STE 900

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  

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

**Transaction ID:** 00813.C3778  
 Amount of Each Receipt this Period  
250.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS  
Mailing Address 412 FIRST ST, SE, STE 300

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

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	8	/	0	6	/	2	0	1	0

**Transaction ID:** 00813.C3759  
 Amount of Each Receipt this Period  
2000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

**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 18 / 28  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
INVESTMENT COMPNAY INSTITUTE PAC

Mailing Address 1401 H ST, NW, STE 1200

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY  
08 / 18 / 2010

Transaction ID: 00818.C3795

Amount of Each Receipt this Period: 2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
KOCHPAC - KOCH INDUSTRIES, INC PAC

Mailing Address 600 14TH ST NW, STE 800

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY  
08 / 05 / 2010

Transaction ID: 00813.C3755

Amount of Each Receipt this Period: 2500.00

Receipt

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

Mailing Address 607 14TH ST, NW, STE 950

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 ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: 00813.C3777

Amount of Each Receipt this Period: 1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

**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 19 / 28  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
REITPAC REAL ESTATES INVESTMENTS TRUST

Mailing Address 1875 I STREET, NW, STE 600

City State Zip Code  
WASHINGTON DC 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2010

Transaction ID: 00813.C3758

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
UBA ACTION PAC

Mailing Address 185 S. STATE, STE 201

City State Zip Code  
SALT LAKE CITY UT 84111

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: 00813.C3773

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5250.00

**TOTAL** This Period (last page this line number only) ..... ► 15000.00

**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)  
ORRINPAC

A.	Full Name (Last, First, Middle Initial) BARRY ANDERSON	Transaction ID: 00915.E2172 Date of Disbursement 08 / 18 / 2010
	Mailing Address 76 TARTARIAN CIR	
	City BOUNTIFUL State UT Zip Code 84010-	Amount of Each Disbursement this Period 241.05
	Purpose of Disbursement Reimbursement see below Candidate Name	REIMBURSEMENT SEE BELOW
	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.	Full Name (Last, First, Middle Initial) Penske Trucking	Transaction ID: 00916.E2193 Date of Disbursement 08 / 18 / 2010
	Mailing Address 1172 Swaner Rd	
	City SALT LAKE CITY State UT Zip Code 84104-	Amount of Each Disbursement this Period 241.05
	Purpose of Disbursement Truck rental for Pac event Candidate Name	[MEMO ITEM] MEMO: TRUCK RENTAL FOR PAC EVENT
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Autumn E-Media	Transaction ID: 00915.E2171 Date of Disbursement 08 / 30 / 2010
	Mailing Address PO Box 371553	
	City LAS VEGAS State NV Zip Code 89137-	Amount of Each Disbursement this Period 578.75
	Purpose of Disbursement Pac consulting Candidate Name	PAC CONSULTING
	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>819.80</b>
<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 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)  
ORRINPAC

<b>A.</b> Full Name (Last, First, Middle Initial) NORTH CAPITOL STREET ENTERPRISES Mailing Address 400 N. CAPITOL ST, NW, STE 585 City WASHINGTON State DC Zip Code 20001- Purpose of Disbursement Office rent and phone Candidate Name 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) ▼	Transaction ID: 00915.E2179 Date of Disbursement 08 / 30 / 2010
	Amount of Each Disbursement this Period 1021.56 OFFICE RENT AND PHONE

<b>B.</b> Full Name (Last, First, Middle Initial) NORTHCIRCLE, LLC Mailing Address 552 WEST 925 NORTH CIRCLE City CENTERVILLE State UT Zip Code 84014- Purpose of Disbursement Pac consulting and expenses Candidate Name 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) ▼	Transaction ID: 00915.E2180 Date of Disbursement 08 / 03 / 2010
	Amount of Each Disbursement this Period 950.16 PAC CONSULTING AND EXPENS-ES

<b>C.</b> Full Name (Last, First, Middle Initial) NORTHCIRCLE, LLC Mailing Address 552 WEST 925 NORTH CIRCLE City CENTERVILLE State UT Zip Code 84014- Purpose of Disbursement Pac consulting and expenses Candidate Name 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) ▼	Transaction ID: 00915.E2181 Date of Disbursement 08 / 05 / 2010
	Amount of Each Disbursement this Period 2350.00 PAC CONSULTING AND EXPENS-ES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4321.72
<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 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)  
ORRINPAC

<b>A.</b> Full Name (Last, First, Middle Initial) OCTOBER, INC. <hr/> Mailing Address 11445 DIVELY AVENUE <hr/> City LAS VEGAS State NV Zip Code 89138- <hr/> Purpose of Disbursement Email & website management Candidate Name <hr/> 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) ▼	Transaction ID: 00915.E2182 Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2010
	Amount of Each Disbursement this Period 500.00 <hr/> EMAIL & WEBSITE MANAGEMENT

<b>B.</b> Full Name (Last, First, Middle Initial) RootsHQ, LLC <hr/> Mailing Address 211 7th Avenue North Suite LL-15 <hr/> City NASHVILLE State TN Zip Code 37219- <hr/> Purpose of Disbursement Pac consulting Candidate Name <hr/> 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) ▼	Transaction ID: 00915.E2183 Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2010
	Amount of Each Disbursement this Period 99.00 <hr/> PAC CONSULTING

<b>C.</b> Full Name (Last, First, Middle Initial) RootsHQ, LLC <hr/> Mailing Address 211 7th Avenue North Suite LL-15 <hr/> City NASHVILLE State TN Zip Code 37219- <hr/> Purpose of Disbursement Online merchant fee Candidate Name <hr/> 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) ▼	Transaction ID: 00915.E2189 Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2010
	Amount of Each Disbursement this Period 67.85 <hr/> ONLINE MERCHANT FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	666.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 24 / 28

<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)  
ORRINPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) RootsHQ, LLC</p> <p>Mailing Address 211 7th Avenue North Suite LL-15</p> <p>City NASHVILLE State TN Zip Code 37219-</p> <p>Purpose of Disbursement Online merchant fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00915.E2190 <b>Date of Disbursement</b> 08 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 135.70</p> <p>ONLINE MERCHANT FEE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Denice Skidmore</p> <p>Mailing Address 3632 S 2700 E</p> <p>City SALT LAKE CITY State UT Zip Code 84109-</p> <p>Purpose of Disbursement Pac consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00915.E2176 <b>Date of Disbursement</b> 08 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 960.00</p> <p>PAC CONSULTING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) WASATCH GOLF COURSE</p> <p>Mailing Address 975 WEST GOLF COURSE DRIVE</p> <p>City MIDWAY State UT Zip Code 84049-</p> <p>Purpose of Disbursement Food for Pac event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00915.E2187 <b>Date of Disbursement</b> 08 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 4692.94</p> <p>FOOD FOR PAC EVENT</p>

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

5788.64

**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 25 / 28

<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)  
ORRINPAC

A.	Full Name (Last, First, Middle Initial) <b>WASATCH GOLF COURSE</b>	<b>Transaction ID:</b> 00915.E2186 Date of Disbursement 08 / 07 / 2010	
	Mailing Address 975 WEST GOLF COURSE DRIVE		
	City MIDWAY State UT Zip Code 84049-	Amount of Each Disbursement this Period	11205.00
	Purpose of Disbursement Golf fees		
	Candidate Name	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) ▼	GOLF FEES
B.	Full Name (Last, First, Middle Initial) <b>ZIONS BANK</b>	<b>Transaction ID:</b> 00915.E2188 Date of Disbursement 08 / 07 / 2010	
	Mailing Address 310 SOUTH MAIN ST		
	City SALT LAKE CITY State UT Zip Code 84101-	Amount of Each Disbursement this Period	25.00
	Purpose of Disbursement Service charge		
	Candidate Name	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) ▼	SERVICE CHARGE
C.	Full Name (Last, First, Middle Initial) <b>ZIONS BANK</b>	<b>Transaction ID:</b> 00915.E2191 Date of Disbursement 08 / 10 / 2010	
	Mailing Address 310 SOUTH MAIN ST		
	City SALT LAKE CITY State UT Zip Code 84101-	Amount of Each Disbursement this Period	44.35
	Purpose of Disbursement Service charge		
	Candidate Name	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) ▼	SERVICE CHARGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>11274.35</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>27202.83</b>

**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)

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<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)  
ORRINPAC

A.	Full Name (Last, First, Middle Initial) Rossi for Senate	Transaction ID: 00915.E2184 Date of Disbursement
	Mailing Address PO Box 50713	<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City BELLEVUE State WA Zip Code 98015-	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION TO GENERAL	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	CONTRIBUTION TO GENERAL
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="5000.00"/>

**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)

PAGE 27 / 28

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ORRINPAC

A.

Full Name (Last, First, Middle Initial)  
Committee to Elect Derek Brown

Transaction ID: 00915.E2175

Date of Disbursement

Mailing Address PO Box 902020

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

City SANDY State UT Zip Code 84090-

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
STATE CANDIDATE CONTRIBUTION

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Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

500.00
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TOTAL This Period (last page this line number only) ..... ►

500.00
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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)

PAGE 28 / 28

<input 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ORRINPAC

A.

Full Name (Last, First, Middle Initial)  
STOEL RIVES LLP PAC

Transaction ID: 00915.E2185  
Date of Disbursement

Mailing Address 900 SW FIFTH AVE, STE 2600

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

City State Zip Code  
PORTLAND OR 97204-1268

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Refund of Contribution Refund

010
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1000.00
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TOTAL This Period (last page this line number only) ..... ►

1000.00
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