FEC FORM 3

Only

FE5AN018

100%

REPORT OF RECEIPTS AND DISBURSEMENTS

2011 JUL -7 AM 11: 46

(Revised 02/2003)

For An Authorized Committee Office Use Only NAME OF TYPE OR PRINT ▼ Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. POWELL FOR CONGRESS ADDRESS (number and street) Check if different HMOND than previously reported. (ACC) ZIP CODE STATE **FEC IDENTIFICATION NUMBER** ▼ CITY STATE ▼ DISTRICT **AMENDED** 3. IS THIS Ø.71 OR REPORT (A) TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: Primary (12P) General (12G) Runoff (12R) April 15 Quarterly Report (Q1) Convention (12C) Special (12S) July 15 Quarterly Report (Q2) 1 06 2011 in the October 15 Quarterly Report (Q3) Election on State of January 31 Year-End Report (YE) (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Termination Report (TER) in the Election on State of Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Frederick Type or Print Name of Treasurer Date 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 FEC FORM 3 Use

FEC Form 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Page 2

Write or Type Committee Name

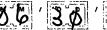
POWELL FOR CONGRESS

Report Covering the Period:

From:









		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	0000	16000
	(b) Total Contribution Refunds (from Line 20(d))		
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))		
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)		
	(b) Total Offsets to Operating Expenditures (from Line 14)		
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))		
8.	Cash on Hand at Close of Reporting Period (from Line 27)	[
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	129269	

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

Page 3

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Report Covering the Period:

From:





	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		160,00		
	(ii) Unitemized				
	(b) Political Party Committees				
	(d) The Candidate	[, 1.66.60]	160.00		
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				
13.	LOANS: (a) Made or Guarenteed by the Candidate				
	(c) TOTAL LOANS (add Lines 13(a) and (b))				
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)				
15.	OTHER RECEIPTS (Dividends, Interest, etc.)				
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	16660	1600 ^p		

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3 (Revised 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Peried	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		y ang
 19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		en effective framework to the first of the f
	(b) Of All Other Loans		
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		paratus gras galetynasjastjastjastjast (1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
	(b) Political Party Committees		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		The German Construction of the Section Construction Construction of the Section Construction C
 21.	OTHER DISBURSEMENTS		andre and receptable and the contract of the c
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	00.00	00.00
	III. CASH S	SUMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	ORTING PERIOD	2000
24	TOTAL RECEIPTS THIS PERIOD (from Line	e 16, page 3)	160.00
25.	SUBTOTAL (add Line 23 and Line 24)	······································	66.0
26.	TOTAL DISBURSEMENTS THIS PERIOD (fi	rom Line 22)	
27.	CASH ON HAND AT CLOSE OF REPORTIN	NG PERIOD	160.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE OF

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

ITEMIZED RECEIPTS	Detailed Summary Page	11a 11b 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and Statement or for commercial purposes, other than using the name		
NAME OF COMMITTEE (IT) Full) POWE	12 FOR CONC	aRESS
A. Mailing Address Rivers Royal Ste	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.	<u> Ima Canadina Diris Diris Dira Dira Diradi</u>	Amount of Each Receipt this Period
Receipt For: Elect Primary General Other (specify)	tion Cycle-to-Date	ಕು ಸಂಪರ್ವವಣಗಳು ಸ್ವರ್ಣ ಪ್ರತಿಗಳು ಪ್ರತಿಕ್ರಿಸಿದ್ದಾರೆ
	eek Trl. ate Zipfort	Date of Receipt
Ketivea	upation	Amount of Each Receipt this Period
Primary General Other (specify)	tion Cycle-to-Date	
	QD Zip Code 1	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employers Occi	4 d,3d3 4	Amount of Each Receipt this Period
Primary General Other (specify)	tion Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		, , , , 60,00

S	CHEDULE B (FEC Form 3)	Use separate schedule(s)		FOR LINE NUMBER: PAGE OF		
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		(check only one) 17 18 19a 19b		
				20a 20b 20c 21		
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and					
K	NAME OF COMMITTEE (In Full)					
$ \rangle$						
<u>_</u>	Full Name (Last, First, Middle Initial)					
A.		Date of Disbursement				
	Mailing Address	M / P P / Y Y Y				
	City State	Zip Code		Amount of Each Disbursement this Period		
	Purpose of Disbursement		(- fu - c - 5			
	Candidate Name	-	Category/ Type			
	Office Sought: House Disbursement For		.,,,,,			
	Senate Primary President Other (s					
_	State: District:					
	Full Name (Last, First, Middle Initial)			2		
В.		Date of Disbursement				
	Mailing Address					
	City State	Amount of Each Disbursement this Period				
	Purpose of Disbursement	3 Language 2 Marie 2 M				
	Candidate Name					
	Office Sought: House Disbursement For	<u>'</u>	Type			
	Senate Primary	<u>_</u>		·		
	State: District: Other (s	specity)				
_	Full Name (Last, First, Middle Initial)					
C.				Date of Disbursement		
	Mailing Address					
	City State Zip Code			Amount of Each Disbursement this Period		
	Purpose of Disbursement					
	Candidate Name Category/			¹ . 1		
	Office Sought: Disbursement For:			7		
	Senate Primary President Other (s	نــا				
_	State: District:					
Γ				government statements of violents as		
15	SUBTOTAL of Disbursements This Page (optional)					
1.	COTAL This Period (last page this line number only)	e i g water g en en er er				

SCHEDULE C (FEC Form 3) LOANS

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

PAGE OF
FOR LINE NUMBER: (check only one) 13a

	Detailed Suramary Page 13b					
NAME OF COMMITTEE (ID FUIL) FOR (CONGRESS					
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary General					
Mailing Address Sox 73161	Other (specify) ▼					
City Richmand State ZIP Coo	3235					
Original Amount of Loan Cumulative Payment To	Balance Outstanding at Close of This Period					
TERMS Date Incurred Date Due	Interest Rate Secured: 0.0.0.0.0 % (apr)					
List All Endorsers or Guarantors (if any) to Loan Source						
Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
City State ZIP Code	Amount Guaranteed Outstanding:					
2. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
City State ZIP Code	Amount Guaranteed Outstanding: Outstanding: Outstanding: Outstandin					
3. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
City State ZIP Code	Amount Guaranteed Outstanding:					
4. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
City State ZIP Code	Amount Guaranteed Coutstanding:					
SUBTOTALS This Period This Page (optional)						
Carry outstanding balance only to LINE 3. Schedule D, for this line. If a	no Schedule D. carry forward to appropriate line of Summary.					

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463					
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)			
Tuli Name	<u> </u>				
Mailing Address	Date Incurred or Established	M - M / D - D / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y			
City State Zip Code	Date Due				
A. Has loan been restructured? No Yes	If yes, date originally incurred	M W / DOD / Y Y Y			
B. If line of credit, Amount of this Draw:	Outstanding				
C. Are other parties secondarily liable for the debt incur. No Yes (Endorsers and guarantors me	red? ust be reported on Schedule C.)				
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other. No Yes If yes, specify:	of deposit, chattel papers, er similar traditional collateral?	t is the value of this collateral?			
E. Are any ruture contributions or future receipts of intercollateral for the loan? No Yes If yes, s	rest income, pledged as specify:	est in it? No Yes at is the estimated value?			
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:				
Date account established:	Address: City, State, Zip:				
F. If neither of the types of collateral described above veceed the loan amount, state the basis upon which	was pledged for this loan, or if the an this loan was made and the basis or	nount pledged does not equal or n which it assures repayment.			
G. COMMITTEE TREASURER		DATE			
Typed Name Signature		MM / P / Y - Y - Y - Y			
H. Attach a signed copy of the loan agreement.					
 TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the lare accurate as stated above. 					
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed f similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. 					
AUTHORIZED REPRESENTATIVE		DATE			
Typed Name	itle	MYM / DUD / Y Y Y Y			
		APPENDED AND TEST			

SC	HEDULE D (FEC Form 3)		(Use se	parate	PAGE	OF
DERTS AND ORLIGATIONS			sched for e	ule(s)	FOR LINE NUMBER	
				ed line)	(check only one)	9
	AME OF COMMITTEE (in Full)			-		, , , , , , , , , , , , , , , , , , ,
	A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Na	ature of D	ebt (Purpose):	
				•		
	Mailing Address					
	City State	Zip Code				
	Outstanding Balance Beginning This Period					
	Amount Incurred This Period	Payment This Period			ng Balance at Close o	
				İi	······································	<u> </u>
	B. Full Name (Last, First, Middle Initial) of Debtor				ebt (Purpose):	
	Mailing Address					
	City State	Zip Code				
	Outstanding Balance Beginning This Period		_			
	Amount Incurred This Period	Payment This Period	(Outstandir	ng Balance at Close o	f This Period
				li	<u> </u>	- 5
	C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Na	ature of D	ebt (Purpose):	
	Mailing Address					
	City	State Zip Code				
	Outstanding Balance Beginning This Period		L			
,	Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close o	f This Period
			_2	! !- <u></u> -		<u> </u>
٠.,	AUDTOTAL O THE DESIGNATION OF A STATE OF			 		,. ,. ,. ,.
	SUBTOTALS This Period This Page (optional)		-			
2)	TOTALS This Period (last page this line number	only)	>	<u> </u> 35-		
3)	TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	▶			
4)	4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)					

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)			Report Cove	Report Covering Period: From: To:			
					MUM / D.D	/ Y · Y · Y · Y	
	. <u>-</u>	Committee Na	ame		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
Co	olumn Total Last Page O	nly					
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans	
Δ							
в							
	(i) Line No. 13(c) Total Loans	(i) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(I) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees	
A							
В							
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committee	
Δ							
в							
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligation Owed TO the Committee	
Α							
В							
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures				
A							
В							

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate how	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirma	tion™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	•
Overnight Delivery Service (Specify): Fed Ex Next Business D	Shipping Date 7/6/11 Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eipt or Postmarked
ROSERADER	7/1/11
(3/2005)	DATE PREPARED