

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
WESTERN REPRESENTATION PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

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>X</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>	X	Y	Y	Y	2	0	1	0		1317.58
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	83377.52									
(c) Total Receipts (from Line 19)	89258.76	325495.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	172636.28	326812.94								
7. Total Disbursements (from Line 31)	61741.92	215918.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	110894.36	110894.36								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
WESTERN REPRESENTATION PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

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)	30962.00	82247.00
(ii) Unitemized	58266.76	243182.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	89228.76	325429.96
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	89228.76	325429.96
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	35.40
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	30.00	30.00
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))	89258.76	325495.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	89258.76	325495.36

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.....	7554.14	59347.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7554.14	59347.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	18100.00
24. Independent Expenditure (use Schedule E)	49187.78	138470.83
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))..	61741.92	215918.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61741.92	215918.58

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)	89228.76	325429.96
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	89228.76	325429.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7554.14	59347.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	35.40
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7554.14	59312.35

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

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

FOR LINE NUMBER: PAGE 6 / 70
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Sandra Barrett

Mailing Address PO Box 1185

City State Zip Code
Alto NM 88312

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

Name of Employer none Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.16991
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
William Becker

Mailing Address 96 George K Dr.

City State Zip Code
Sand Lake MI 49343

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

Name of Employer Bill Becker Corp Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 05 / 2010
Transaction ID: SA11AI.18421
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
James Beckman

Mailing Address 2081 Dime Drive

City State Zip Code
Springdale AR 72764

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.17115
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Kermit Begly	Date of Receipt MM / DD / YYYY 10 / 08 / 2010
	Mailing Address 204 Clint Dr	Transaction ID: SA11AI.17630
	City Cleveland State NC Zip Code 27013	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Werner Enterprises Occupation Truckdriver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Kermit Begly	Date of Receipt MM / DD / YYYY 10 / 08 / 2010
	Mailing Address 204 Clint Dr	Transaction ID: SA11AI.17654
	City Cleveland State NC Zip Code 27013	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Werner Enterprises Occupation Truckdriver		
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) TOM BIRDNOW	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 17024 ORCHARD AVE	Transaction ID: SA11AI.18729
	City OMAHA State NE Zip Code 68135	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer PROFESSIONAL LABEL CO Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 70
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
TOM BIRDNOW

Mailing Address **17024 ORCHARD AVE**

City **OMAHA** State **NE** Zip Code **68135**

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

Name of Employer **PROFESSIONAL LABEL CO** Occupation **EXECUTIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **10 / 11 / 2010**
Transaction ID: SA11AI.17087
 Amount of Each Receipt this Period **75.00**

B. Full Name (Last, First, Middle Initial)
Joyce Boghosian

Mailing Address **534 Webster Drive**

City **Martinez** State **CA** Zip Code **94553**

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

Name of Employer **John Muir Health** Occupation **Lab safety coord.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **10 / 12 / 2010**
Transaction ID: SA11AI.16812
 Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
Pamela Boker

Mailing Address **719 Bedford Road**

City **Bedford Corners** State **NY** Zip Code **10549**

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

Name of Employer **self** Occupation **psychologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 05 / 2010**
Transaction ID: SA11AI.18412
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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 / 70
	<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)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Andrew Borom

Mailing Address 4492 Rhoden Cove Lane

City State Zip Code
Tallahassee FL 32312

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

Name of Employer Tallahassee Orthopedic Clinic Occupation Orthopedic Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: SA11AI.18762
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Dan Boyd

Mailing Address 1400 West Third Ave

City State Zip Code
Denver CO 80223

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

Name of Employer BOYD INVESTMENT CO Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 12 / 2010
Transaction ID: SA11AI.18815
Amount of Each Receipt this Period: 100.00

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

Mailing Address 101 Conestoga Drive

City State Zip Code
Carson City NV 89706

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

Name of Employer self Occupation sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 06 / 2010
Transaction ID: SA11AI.18088
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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 10 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
scott brusseau

Mailing Address 2892 lone jack road

City encinitas State CA Zip Code 92024

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

Name of Employer newport antional corp Occupation investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.18304

Amount of Each Receipt this Period
 250.00

B.

Full Name (Last, First, Middle Initial)
James Burgess

Mailing Address 5082 Estella Lane

City Shelby Township State MI Zip Code 48316

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

Name of Employer BI Occupation Production Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.18595

Amount of Each Receipt this Period
 100.00

C.

Full Name (Last, First, Middle Initial)
Jack Buzbee

Mailing Address 200 E Douglas St

City De Soto State IL Zip Code 62924

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

Name of Employer none Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: SA11AI.18631

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 11 / 70		
	<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

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Jack Buzbee		Date of Receipt
	Mailing Address 200 E Douglas St		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	De Soto	IL	62924
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18566
Name of Employer none		Occupation retired	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="50.00"/>
		<input type="text" value="290.00"/>	

B.	Full Name (Last, First, Middle Initial) Jack Buzbee		Date of Receipt
	Mailing Address 200 E Douglas St		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	De Soto	IL	62924
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17450
Name of Employer none		Occupation retired	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="50.00"/>
		<input type="text" value="340.00"/>	

C.	Full Name (Last, First, Middle Initial) Jack Buzbee		Date of Receipt
	Mailing Address 200 E Douglas St		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	De Soto	IL	62924
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16773
Name of Employer none		Occupation retired	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="50.00"/>
		<input type="text" value="390.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL 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: (check only one)	PAGE 12 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) William Cain	Date of Receipt MM / DD / YYYY 10 / 03 / 2010
	Mailing Address 2550 Fairview Dr	Transaction ID: SA11AI.16606
	City State Zip Code Cumming GA 30041	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NA Occupation NA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="checkbox"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Larry Carter	Date of Receipt MM / DD / YYYY 10 / 07 / 2010
	Mailing Address 13409 Hughes Lane	Transaction ID: SA11AI.17718
	City State Zip Code Dallas TX 75240	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="checkbox"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Ralph Clinard	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 3306Chartreuse Way	Transaction ID: SA11AI.18738
	City State Zip Code Houston TX 77082	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="checkbox"/> 650.00	

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Ralph Clinard

Mailing Address 3306Chartreuse Way

City State Zip Code
Houston TX 77082

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

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

Transaction ID: SA11AI.17610

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Ralph Clinard

Mailing Address 3306Chartreuse Way

City State Zip Code
Houston TX 77082

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

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

Transaction ID: SA11AI.17614

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Ralph Clinard

Mailing Address 3306Chartreuse Way

City State Zip Code
Houston TX 77082

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.16770

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 14 / 70
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Kim Conant		Date of Receipt MM / DD / YYYY 10 / 10 / 2010		
	Mailing Address 14735 Poway Mesa Dr.		Transaction ID: SA11AI.17362		
	City Poway	State CA	Zip Code 92064	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Name of Employer PUSD		
Occupation Ret. Teacher		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 700.00					

B.	Full Name (Last, First, Middle Initial) Peter Coors		Date of Receipt MM / DD / YYYY 10 / 07 / 2010		
	Mailing Address 15205 W 32nd Ave		Transaction ID: SA11AI.16611		
	City Golden	State CO	Zip Code 80401	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Name of Employer Molson Coors Brewing Company		
Occupation Chairman		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 500.00					

C.	Full Name (Last, First, Middle Initial) Larry Courtney		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 2718 w. oakland park blvd.		Transaction ID: SA11AI.19243		
	City fort lauderdale	State FL	Zip Code 33311	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		Name of Employer NA		
Occupation NA		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 300.00					

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 15 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Sharon Cumming		Date of Receipt
	Mailing Address 6001 Palm Trace Landings Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Davie	FL	33314
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18420
Name of Employer Self Employed		Occupation Accountant	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 ▼ 350.00	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) michael Davis		Date of Receipt
	Mailing Address 3219 Stratford Hills Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Austin	TX	78746
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18345
Name of Employer self		Occupation sales	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 ▼ 330.00	<input type="text"/> 100.00

C.	Full Name (Last, First, Middle Initial) Mike Delgado		Date of Receipt
	Mailing Address 14673-A		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 3 / 2 0 1 0
	City	State	Zip Code
	Mountain View	CA	94035
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.19218
Name of Employer Self		Occupation Electrical Engineer	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 ▼ 370.00	<input type="text"/> 150.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 350.00
TOTAL 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 16 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Mike Delgado

Mailing Address 14673-A

City State Zip Code
Mountain View CA 94035

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

Name of Employer Self Occupation
Electrical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 567.00

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

Transaction ID: SA11AI.18890

Amount of Each Receipt this Period
197.00

B.

Full Name (Last, First, Middle Initial)
John Demello

Mailing Address PO Box 22

City State Zip Code
Danbury NH 03230

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

Name of Employer Hawkeye LLC Occupation
Lineman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11AI.17300

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Edward Dempsey

Mailing Address 130 Glenwood Ave. Apt 32

City State Zip Code
Yonkers NY 10703

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

Name of Employer None Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI.18758

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **347.00**

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 17 / 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Paul Denyer		Date of Receipt
	Mailing Address 14130 Rancho Vista Bend		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	San Diego	CA	92130
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17813
Name of Employer N/A		Occupation N/A	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="250.00"/>

B.	Full Name (Last, First, Middle Initial) john destefano		Date of Receipt
	Mailing Address 201 kentford ct		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	warrington	PA	18976
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.19033
Name of Employer none		Occupation none	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="150.00"/>

C.	Full Name (Last, First, Middle Initial) Tom Devaney		Date of Receipt
	Mailing Address 3727 West Magnolia Blvd		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Burbank	CA	91505
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18003
Name of Employer N/A		Occupation N/A	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="100.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL 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: (check only one)	PAGE 18 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Robert Dietrich		Date of Receipt
	Mailing Address 1312 Burbeck Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 8 / 2 0 1 0
	City	State	Zip Code
	Richmond	CA	94801
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17569
Name of Employer retired		Occupation retired	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 ▼ 220.00	<input type="text"/> 30.00

B.	Full Name (Last, First, Middle Initial) Richard Dietz		Date of Receipt
	Mailing Address 14 Crescent Park		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 1 / 2 0 1 0
	City	State	Zip Code
	San Antonio	TX	78257
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18788
Name of Employer AT&T		Occupation Retired	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 ▼ 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Richard Dietz		Date of Receipt
	Mailing Address 14 Crescent Park		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 0 / 2 0 1 0
	City	State	Zip Code
	San Antonio	TX	78257
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17443
Name of Employer AT&T		Occupation Retired	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 ▼ 350.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 380.00
TOTAL 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 19 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Jonas Dovydenas

Mailing Address 319 Undermountain Road

City Lenox State MA Zip Code 01240

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

Name of Employer NA Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 02 / 2010
Transaction ID: SA11AI.18661
 Amount of Each Receipt this Period: 150.00

B.

Full Name (Last, First, Middle Initial)
Elliott Fenton

Mailing Address 14901 N Pennsylvania Ave Cottage 4

City Oklahoma City State OK Zip Code 73134

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

Name of Employer Fenton, Fenton, Smith, Reneau and Moon Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.17102
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Paul Flowers

Mailing Address 53 Foxchase Drive

City Dothan State AL Zip Code 36305

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

Name of Employer none Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 08 / 2010
Transaction ID: SA11AI.17602
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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 20 / 70

(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Richard Foster

Mailing Address 4020 Kinross Lakes Parkway

City State Zip Code
Richfield OH 44286

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

Name of Employer Occupation
GIE Media, Inc. Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.18439

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Richard Frachtman

Mailing Address 11530 Raintree Cir

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
Self MD

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.16621

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
Clarence T Froscher

Mailing Address 95258 WILDER BLVD

City State Zip Code
FERNANDINA BCH FL 32034

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

Name of Employer Occupation
none rtird

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.17357

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Daniel Frost

Mailing Address PO Box 271

City State Zip Code
Mexia TX 76667

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

Name of Employer Occupation
Frost Crushed Stone Rock Crushing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2010

Transaction ID: SA11AI.18205

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Donald Frye

Mailing Address 12 Gage Ct.

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
Self Geophysicist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2010

Transaction ID: SA11AI.18181

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
norman gavin

Mailing Address 173 church st.

City State Zip Code
wallingford CT 06492

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

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 03 / 2010

Transaction ID: SA11AI.19209

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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 22 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) norman gavin	Date of Receipt
	Mailing Address 173 church st.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 05 / 2010
	City State Zip Code wallingford CT 06492	Transaction ID: SA11AI.18425
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 100.00
	Name of Employer Occupation retired retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) william gerry	Date of Receipt
	Mailing Address 17 cobb isle rd.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 11 / 2010
	City State Zip Code water mill NY 11976	Transaction ID: SA11AI.17231
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 250.00
	Name of Employer Occupation NA finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Gloria Gill	Date of Receipt
	Mailing Address 767 Rocky Branch Lane	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 01 / 2010
	City State Zip Code Evans GA 30809	Transaction ID: SA11AI.18756
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 50.00
	Name of Employer Occupation Club Car Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 400.00
TOTAL 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: (check only one)	PAGE 23 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Gloria Gill		Date of Receipt
	Mailing Address 767 Rocky Branch Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 0 / 2 0 1 0
	City	State	Zip Code
	Evans	GA	30809
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17480
Name of Employer Club Car		Occupation Editor	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"/> 100.00
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) donald glessner		Date of Receipt
	Mailing Address 99252 ohekani lp		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 4 / 2 0 1 0
	City	State	Zip Code
	aiea	HI	96701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18454
Name of Employer self		Occupation retired	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"/> 100.00
		<input type="text"/> 225.00	

C.	Full Name (Last, First, Middle Initial) David Gordon		Date of Receipt
	Mailing Address 10423 Hart Branch Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	City	State	Zip Code
	Orlando	FL	32832
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18796
Name of Employer NA		Occupation NA	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"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 700.00
TOTAL 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 24 / 70

(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)

robert greenberg

Mailing Address 2919 meadow drive

City State Zip Code
marietta GA 30062

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

Name of Employer Occupation
SELF RET

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.18385

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

John Haesler

Mailing Address 24 San Ramon

City State Zip Code
Irvine CA 92612

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

Name of Employer Occupation
CoreLink Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.18712

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Marie Harlan

Mailing Address 27140 East El Macero Drive

City State Zip Code
El Macero CA 95618

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

Name of Employer Occupation
N/A N/A

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.17902

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

650.00

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 25 / 70
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Zeb Harrison
 Mailing Address 5193 N Miller Ln
 City State Zip Code
 Las Vegas NV 89149
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 1 0
Transaction ID: SA11AI.18100
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF precision solar screens
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
Stephen Hart
 Mailing Address 200 Sunset Ter
 City State Zip Code
 Cedar Park TX 78613
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 1 / 2 0 1 0
Transaction ID: SA11AI.17164
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 State of Texas Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

C. Full Name (Last, First, Middle Initial)
Ronald Hawley
 Mailing Address 6301 Stevenson Ave #1313
 City State Zip Code
 Alexandria VA 22304
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 8 / 2 0 1 0
Transaction ID: SA11AI.17642
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NA Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

SUBTOTAL of Receipts This Page (optional) ► 650.00
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 26 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Lee Holmes

Mailing Address 530 W. O'Brien Dr.

City Hagatna State GU Zip Code 96910

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

Name of Employer SOUTHERN MEDIA, INC. Occupation manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6500.00

Date of Receipt: 10 / 03 / 2010

Transaction ID: SA11AI.21798

Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Lee Holmes

Mailing Address 530 W. O'Brien Dr.

City Hagatna State GU Zip Code 96910

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

Name of Employer SOUTHERN MEDIA, INC. Occupation manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt: 10 / 10 / 2010

Transaction ID: SA11AI.21799

Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
Bertha Hoskins

Mailing Address 2202 Spinnaker Court

City Reston State VA Zip Code 20191

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

Name of Employer NA Occupation NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 06 / 2010

Transaction ID: SA11AI.19148

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.21798**

Reattribution request letter sent

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.21799**

Reattribution request letter sent

**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 28 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Glenn Howell		Date of Receipt
	Mailing Address 29622 hwy 17		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 1 / 2 0 1 0
	City	State	Zip Code
	Reform	AL	35481
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18749
Name of Employer Sanderson		Occupation supt	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"/> 250.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Glenn Howell		Date of Receipt
	Mailing Address 29622 hwy 17		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 4 / 2 0 1 0
	City	State	Zip Code
	Reform	AL	35481
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18468
Name of Employer Sanderson		Occupation supt	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"/> 300.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) Glenn Howell		Date of Receipt
	Mailing Address 29622 hwy 17		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 0 8 / 2 0 1 0
	City	State	Zip Code
	Reform	AL	35481
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17601
Name of Employer Sanderson		Occupation supt	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"/> 350.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL 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 29 / 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Glenn Howell

Mailing Address 29622 hwy 17

City Reform State AL Zip Code 35481

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

Name of Employer Sanderson Occupation supt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.17014
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Glenn Howell

Mailing Address 29622 hwy 17

City Reform State AL Zip Code 35481

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

Name of Employer Sanderson Occupation supt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11AI.16762
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Daniel Hughes

Mailing Address 2005 Fern Hill Ct.

City Henderson State NV Zip Code 89252

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

Name of Employer Glass Supply, Inc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: SA11AI.18706
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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 30 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) peter hunt	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address 10 rabro drive	Transaction ID: SA11AI.18494
	City hauppauge State NY Zip Code 11788	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer hunt enterprises Occupation restaurant owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Douglas Iseler	Date of Receipt MM / DD / YYYY 10 / 11 / 2010
	Mailing Address 71231 Burlison Lane	Transaction ID: SA11AI.18967
	City Romeo State MI Zip Code 48065	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NA Occupation NA	
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) Marc Iverson	Date of Receipt MM / DD / YYYY 10 / 07 / 2010
	Mailing Address 6037 Sharon Rd	Transaction ID: SA11AI.17752
	City Charlotte State NC Zip Code 28210	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer none Occupation disabled	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	850.00
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 31 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Joyce Jackson

Mailing Address 5620 E. Southport Road

City Indianapolis State IN Zip Code 46237

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

Name of Employer NA Occupation NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 06 / 2010
Transaction ID: SA11AI.18242
 Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Michelle Joanou

Mailing Address 5663 Bramblewood R.

City La Canada State CA Zip Code 91011

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

Name of Employer NA Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 10 / 2010
Transaction ID: SA11AI.17400
 Amount of Each Receipt this Period: 250.00

C.

Full Name (Last, First, Middle Initial)
Joanne Johnson

Mailing Address 70 Robley Road

City Salinas State CA Zip Code 93908

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

Name of Employer none Occupation homemaker/volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 03 / 2010
Transaction ID: SA11AI.18549
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 750.00

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 32 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Christopher Jones	Date of Receipt MM / DD / YYYY 10 / 05 / 2010
	Mailing Address 411 W. Wellons St.	Transaction ID: SA11AI.18448
	City State Zip Code Smithfield NC 27577	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Stallings Insurance Occupation insurance agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00

B.	Full Name (Last, First, Middle Initial) Christopher Jones	Date of Receipt MM / DD / YYYY 10 / 07 / 2010
	Mailing Address 411 W. Wellons St.	Transaction ID: SA11AI.17734
	City State Zip Code Smithfield NC 27577	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Stallings Insurance Occupation insurance agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00

C.	Full Name (Last, First, Middle Initial) Christopher Jones	Date of Receipt MM / DD / YYYY 10 / 11 / 2010
	Mailing Address 411 W. Wellons St.	Transaction ID: SA11AI.17229
	City State Zip Code Smithfield NC 27577	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Stallings Insurance Occupation insurance agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 33 / 70
	<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)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Diane Kellner

Mailing Address 14260 Charm Hill Dr.

City State Zip Code
Sidney OH 45365

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

Name of Employer Family Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 04 / 2010
Transaction ID: SA11AI.18498
Amount of Each Receipt this Period: 250.00

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

Mailing Address 605 San Elijo St.

City State Zip Code
San Diego CA 92106

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

Name of Employer none Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.16969
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mariette Landwehr

Mailing Address 201 W. Lakeshore Dr.

City State Zip Code
Carriere MS 39426

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 10 / 06 / 2010
Transaction ID: SA11AI.18200
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 375.00

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 34 / 70
	<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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial) Joe LaPilusa		Date of Receipt
Mailing Address P.O.Box 2046		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Grapevine TX 76099		<input type="text"/> 1 0 / <input type="text"/> 0 5 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.19193
Name of Employer Occupation Bayer Healthcare Regional Sales Manager		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 100.00
Aggregate Year-to-Date ▼ <input type="text"/> 550.00		

B.

Full Name (Last, First, Middle Initial) James Lawler		Date of Receipt
Mailing Address 3 Rockledge Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Laguna Beach CA 92651		<input type="text"/> 1 0 / <input type="text"/> 1 2 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16820
Name of Employer Occupation State Farm Ins. Ins. Agent		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 250.00
Aggregate Year-to-Date ▼ <input type="text"/> 250.00		

C.

Full Name (Last, First, Middle Initial) Glenn Lefkovitz		Date of Receipt
Mailing Address 112 Glenwood Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Winnetka IL 60093		<input type="text"/> 1 0 / <input type="text"/> 1 1 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17039
Name of Employer Occupation Glenn Management Management Company		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 250.00
Aggregate Year-to-Date ▼ <input type="text"/> 250.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 600.00
TOTAL 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: (check only one)	PAGE 35 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Wayne Lindholm		Date of Receipt
	Mailing Address 25 Vista Montemar		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Laguna Niguel	CA	92677
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.19172
Name of Employer na		Occupation na	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"/>
		<input type="text"/> 500.00	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Roberta Long		Date of Receipt
	Mailing Address 505 Blue Spruce Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Reno	NV	89511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.17690
Name of Employer WCSD		Occupation Teacher	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"/>
		<input type="text"/> 300.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) Roberta Long		Date of Receipt
	Mailing Address 505 Blue Spruce Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Reno	NV	89511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.16920
Name of Employer WCSD		Occupation Teacher	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"/>
		<input type="text"/> 350.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 350.00
TOTAL 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 36 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Dwight Lowell

Mailing Address 901 Cima del Mundo Rd.

City Montecito State CA Zip Code 93108

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

Name of Employer NA Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.18541

Amount of Each Receipt this Period
 100.00

B.

Full Name (Last, First, Middle Initial)
Keith MacKenzie

Mailing Address 6153 Ceres St.

City Englewood State FL Zip Code 34224

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.18669

Amount of Each Receipt this Period
 100.00

C.

Full Name (Last, First, Middle Initial)
Keith MacKenzie

Mailing Address 6153 Ceres St.

City Englewood State FL Zip Code 34224

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.18493

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 37 / 70
	<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	

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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) James Madden	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 5 Harbor Island	Transaction ID: SA11AI.16735
	City State Zip Code Newport Beach CA 92660	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Accretive LLC	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) William McDowell	Date of Receipt MM / DD / YYYY 10 / 10 / 2010
	Mailing Address 23 Burton St	Transaction ID: SA11AI.17487
	City State Zip Code Cazenovia NY 13035	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) kelly mcmakin	Date of Receipt MM / DD / YYYY 10 / 06 / 2010
	Mailing Address 138 lorenz	Transaction ID: SA11AI.19098
	City State Zip Code san antonio TX 78209	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	400.00
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 38 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) John McNiff		Date of Receipt MM / DD / YYYY 10 / 05 / 2010		
	Mailing Address 11642 Lost Tree Way		Transaction ID: SA11AI.18389		
	City North Palm Beach	State FL	Zip Code 33408	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A	Occupation N/A			

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00
---	-------------------------------------

B.	Full Name (Last, First, Middle Initial) Carroll Mueller		Date of Receipt MM / DD / YYYY 10 / 10 / 2010		
	Mailing Address 2800 Mason Ave.		Transaction ID: SA11AI.17408		
	City Las Vegas	State NV	Zip Code 89102	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer retired	Occupation teacher			

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) Nancy Myers		Date of Receipt MM / DD / YYYY 10 / 06 / 2010		
	Mailing Address 10818 Holly Springs Dr		Transaction ID: SA11AI.18196		
	City Houston	State TX	Zip Code 77042	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SunGard	Occupation Software engineer			

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
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 39 / 70
(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)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Richard Nicolai Jr

Mailing Address 223 Beaumont Drive

City Vista State CA Zip Code 92084

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 07 / 2010

Transaction ID: SA11AI.17669

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
John Nugier

Mailing Address 40128 Road 36

City Kingsburg State CA Zip Code 93631

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

Name of Employer Brake Machinery Sales Inc. Occupation Thinker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 04 / 2010

Transaction ID: SA11AI.18456

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Marie Therese Pero

Mailing Address 3037 122ndPI. NE

City Bellevue State WA Zip Code 98005

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

Name of Employer retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2010

Transaction ID: SA11AI.18071

Amount of Each Receipt this Period 250.00

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 40 / 70
(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)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Marie Therese Pero

Mailing Address **3037 122nd Pl. NE**

City **Bellevue** State **WA** Zip Code **98005**

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

Name of Employer **retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **10 / 10 / 2010**
Transaction ID: SA11AI.17373
 Amount of Each Receipt this Period **200.00**

B. Full Name (Last, First, Middle Initial)
James Perry

Mailing Address **206 SE 10th Terr**

City **Ft. Lauderdale** State **FL** Zip Code **33301**

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

Name of Employer **self** Occupation **retired neurologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **10 / 10 / 2010**
Transaction ID: SA11AI.17398
 Amount of Each Receipt this Period **25.00**

C. Full Name (Last, First, Middle Initial)
Sandra Peterson

Mailing Address **2240 La Sierra Way**

City **Claremont** State **CA** Zip Code **91711**

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

Name of Employer **na** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **10 / 12 / 2010**
Transaction ID: SA11AI.16822
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) ► **475.00**

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 41 / 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) charles pifer		Date of Receipt
	Mailing Address po box 6362		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	carmel	CA	93921
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer none		Occupation retired	Transaction ID: SA11AI.19026
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="50.00"/>

B.	Full Name (Last, First, Middle Initial) trevor pitts		Date of Receipt
	Mailing Address 1236 B St.		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	petaluma	CA	94952
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation investor	Transaction ID: SA11AI.16950
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="100.00"/>

C.	Full Name (Last, First, Middle Initial) trevor pitts		Date of Receipt
	Mailing Address 1236 B St.		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	petaluma	CA	94952
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation investor	Transaction ID: SA11AI.16821
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="350.00"/>	<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL 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 42 / 70
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A. Full Name (Last, First, Middle Initial)
Arnon Rosenthal

Mailing Address 150 Normandy lane

City State Zip Code
Woodside CA 94062

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

Name of Employer mazoRx Occupation scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

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

Transaction ID: SA11AI.18674

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Bradley Rowan

Mailing Address 1318 Morgan Circle

City State Zip Code
Canonsburg PA 15317

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

Name of Employer Dell, Inc Occupation programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11AI.18657

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Bradley Rowan

Mailing Address 1318 Morgan Circle

City State Zip Code
Canonsburg PA 15317

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

Name of Employer Dell, Inc Occupation programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.17793

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **545.00**

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 43 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial) Bradley Rowan		Date of Receipt MM / DD / YYYY 10 / 07 / 2010
Mailing Address 1318 Morgan Circle		Transaction ID: SA11AI.17737
City Canonsburg	State PA	Zip Code 15317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Dell, Inc	Occupation programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.

Full Name (Last, First, Middle Initial) Robert Schmucker		Date of Receipt MM / DD / YYYY 10 / 11 / 2010
Mailing Address 116 Deer Track Court		Transaction ID: SA11AI.17206
City Warner Robins	State GA	Zip Code 31088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C.

Full Name (Last, First, Middle Initial) Frank Schnorbus		Date of Receipt MM / DD / YYYY 10 / 06 / 2010
Mailing Address 1227 Melborn Way		Transaction ID: SA11AI.18024
City Minden	State NV	Zip Code 89423
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Southwest Gas Corp	Occupation Gas Utility specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional)	▶	620.00
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 44 / 70

(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Donald Schroeder

Mailing Address 4160 41st Street #14

City State Zip Code
San Diego GU 92105

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.18324

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Donald Schroeder

Mailing Address 4160 41st Street #14

City State Zip Code
San Diego GU 92105

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.16749

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
William Sears

Mailing Address 357 Edgewood Drive

City State Zip Code
Montgomery TX 77356

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

Name of Employer Occupation
none NA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: SA11AI.17049

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

750.00

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 45 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Martin Silver

Mailing Address 134 Hidden Ponds Cir

City State Zip Code
Smithtown NY 11787

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

Name of Employer na Occupation na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.16618

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Allen Simon

Mailing Address 1383 N Criss St

City State Zip Code
Chandler AZ 85226

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.19128

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Allen Simon

Mailing Address 1383 N Criss St

City State Zip Code
Chandler AZ 85226

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

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

Transaction ID: SA11AI.21803

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **6100.00**

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

C. Form/Schedule : **SA11AI**

Reattribution request letter sent

Transaction ID : **SA11AI.21803**

**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 47 / 70
	<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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Emerson Snider

Mailing Address 4200 Mary Walk

City Norcross State GA Zip Code 30092

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

Name of Employer Emerson Snider & Associates, LLC Occupation JDE Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 08 / 2010
Transaction ID: SA11AI.17631
 Amount of Each Receipt this Period: 20.00

B.

Full Name (Last, First, Middle Initial)
Emerson Snider

Mailing Address 4200 Mary Walk

City Norcross State GA Zip Code 30092

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

Name of Employer Emerson Snider & Associates, LLC Occupation JDE Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: 10 / 10 / 2010
Transaction ID: SA11AI.17505
 Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Emerson Snider

Mailing Address 4200 Mary Walk

City Norcross State GA Zip Code 30092

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

Name of Employer Emerson Snider & Associates, LLC Occupation JDE Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11AI.16800
 Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 70.00

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 48 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
gary snow

Mailing Address 35 vine st.

City State Zip Code
foxboro MA 02035

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

Name of Employer self Occupation merc hant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
10 / 06 / 2010

Transaction ID: SA11AI.17913

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Jerald Spilsbury

Mailing Address 2448 W Valley View Dr.

City State Zip Code
Hurricane UT 84737

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

Name of Employer NA Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
10 / 07 / 2010

Transaction ID: SA11AI.17695

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Virginia Starrett

Mailing Address 891 Stutler Creek Court

City State Zip Code
Gardnerville NV 89410

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

Name of Employer Western Nevada College Occupation English Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2010

Transaction ID: SA11AI.16939

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Ray Strong

Mailing Address 975 Marlinton Ct

City San Jose State CA Zip Code 95120

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

Name of Employer IBM Occupation Research Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 11 / 2010
Transaction ID: SA11AI.16909
Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Virginia Sutton

Mailing Address 6995 North Highway 97

City Sand Springs State OK Zip Code 74063

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

Name of Employer NA Occupation Housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 10 / 2010
Transaction ID: SA11AI.17447
Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
eric taylor

Mailing Address 100 east montecito ave

City sierra madre State CA Zip Code 91024

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

Name of Employer self Occupation construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 01 / 2010
Transaction ID: SA11AI.18720
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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 50 / 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) John Testa	Date of Receipt MM / DD / YYYY 10 / 11 / 2010
	Mailing Address 150 Thunderwood Drive	Transaction ID: SA11AI.18914
	City State Zip Code Bethel Park PA 15102	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) BW Thomas	Date of Receipt MM / DD / YYYY 10 / 10 / 2010
	Mailing Address 806 N. Glendale	Transaction ID: SA11AI.17437
	City State Zip Code Wichita KS 67208	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SSPA Occupation surgeon 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) Jere Thompson	Date of Receipt MM / DD / YYYY 10 / 06 / 2010
	Mailing Address 2913 Fairmount Se.	Transaction ID: SA11AI.17801
	City State Zip Code Dallas TX 75201	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation N/A Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	850.00
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 51 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
edward thurman

Mailing Address 9218 Metcalf Ave.#204

City State Zip Code
Overland Park KS 66212

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

Name of Employer Occupation
MERIT GROUP CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.17104

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Jane Till

Mailing Address 2563 Willowbrook Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer Occupation
NA NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.17725

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Jane Till

Mailing Address 2563 Willowbrook Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer Occupation
NA NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

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

Transaction ID: SA11AI.16833

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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 52 / 70

(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Gneal Trevethan

Mailing Address 2985 Catlett Rd.

City State Zip Code
Pleasant Grove CA 95668

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

Name of Employer Occupation
self-Trevethan Farms Farmer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.16826

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Raymond Turner

Mailing Address 923 Konga Dr

City State Zip Code
Las Vegas NV 89123

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

Name of Employer Occupation
NA NA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.16622

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Lucia Uihlein

Mailing Address 715 Lands End Drive

City State Zip Code
Longboat Key FL 34228

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

Name of Employer Occupation
NA homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

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

Transaction ID: SA11AI.17174

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 70
	<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Lucia Uihlein	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 1 0
	Mailing Address 715 Lands End Drive	Transaction ID: SA11AI.17175
	City State Zip Code Longboat Key FL 34228	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NA Occupation homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1300.00	

B.	Full Name (Last, First, Middle Initial) Jerome Ungs	Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 1 0
	Mailing Address 685 Weathersfield Dr.	Transaction ID: SA11AI.18492
	City State Zip Code Dunedin FL 34698	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

C.	Full Name (Last, First, Middle Initial) Jerome Ungs	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 685 Weathersfield Dr.	Transaction ID: SA11AI.16870
	City State Zip Code Dunedin FL 34698	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional)	300.00
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 54 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
William Wagener

Mailing Address 5759 S Depew Circle

City Littleton State CO Zip Code 80123

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

Name of Employer Minergy Group LLC Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 04 / 2010
Transaction ID: SA11AI.18467
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Sharon Waite

Mailing Address 8301 w Business HWY 83

City Mission State TX Zip Code 78572

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

Name of Employer Self Occupation Agriculture

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.17078
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
larry welch

Mailing Address po box 545

City clark fork State ID Zip Code 83811

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

Name of Employer retired Occupation pilot

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 02 / 2010
Transaction ID: SA11AI.18619
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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 55 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
larry welch

Mailing Address po box 545

City clark fork State ID Zip Code 83811

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

Name of Employer retired Occupation pilot

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 03 / 2010
Transaction ID: SA11AI.18533
Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
larry welch

Mailing Address po box 545

City clark fork State ID Zip Code 83811

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

Name of Employer retired Occupation pilot

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.16889
Amount of Each Receipt this Period: 50.00

C.

Full Name (Last, First, Middle Initial)
Clare Wentworth

Mailing Address 4113 Santa Fe Trail

City Dryden State MI Zip Code 48428

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

Name of Employer Thor Industries Occupation Retired

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11AI.17211
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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 56 / 70
(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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial) Carol Wilson		Date of Receipt MM / DD / YYYY 10 / 04 / 2010
Mailing Address 2197 Sutter View Lane		Transaction ID: SA11AI.19194
City Lincoln	State CA	Zip Code 95648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NA	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

B.

Full Name (Last, First, Middle Initial) Carol Wilson		Date of Receipt MM / DD / YYYY 10 / 06 / 2010
Mailing Address 2197 Sutter View Lane		Transaction ID: SA11AI.19080
City Lincoln	State CA	Zip Code 95648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NA	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

C.

Full Name (Last, First, Middle Initial) Bernard Zimmer		Date of Receipt MM / DD / YYYY 10 / 11 / 2010
Mailing Address 100 Seaview Avenue		Transaction ID: SA11AI.17358
City Norwalk	State CT	Zip Code 06855
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	30962.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 57 / 70	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Henryk Zaleski	Date of Receipt
	Mailing Address 34 Jasmine Street	<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City State Zip Code Lake Placid FL 33852	Transaction ID: SA16.21801
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
	Name of Employer Occupation US Navy Retired	Refund of contribution
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="125.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="30.00"/>

**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 58 / 70

<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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Expedia.com Mailing Address 333 108th Ave NE City Bellevue State WA Zip Code 98004 Purpose of Disbursement Travel expense 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: SB21B.16693 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0	Amount of Each Disbursement this Period 74.84
B.	Full Name (Last, First, Middle Initial) FedEx Mailing Address 3690 Research Way City Carson City State NV Zip Code 89706 Purpose of Disbursement Postage 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: SB21B.16690 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 31.32
C.	Full Name (Last, First, Middle Initial) Hotels.com Mailing Address 10440 N. Central Expwy., Ste. 400 City Dallas State TX Zip Code 75231 Purpose of Disbursement Travel expense 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: SB21B.16688 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 222.69

SUBTOTAL of Disbursements This Page (optional) ▶

328.85

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 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)
WESTERN REPRESENTATION PAC

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.16702 Date of Disbursement
	Mailing Address P.O. Box 36647 - 1CR	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expenses Candidate Name	<input type="text" value="214.70"/>
	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) ▼
		002 Category/Type

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.16698 Date of Disbursement
	Mailing Address P.O. Box 36647 - 1CR	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expense Candidate Name	<input type="text" value="176.70"/>
	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) ▼
		002 Category/Type

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B.16696 Date of Disbursement
	Mailing Address P.O. Box 36647 - 1CR	<input type="text" value="10"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expense Candidate Name	<input type="text" value="198.70"/>
	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) ▼
		002 Category/Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="590.10"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 60 / 70

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

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

NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36647 - 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel Expense</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>Transaction ID: SB21B.16691</p> <p>Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 198.70</p> <p>002 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36647 - 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel Expense</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>Transaction ID: SB21B.16687</p> <p>Date of Disbursement 10 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 1068.00</p> <p>002 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dustin Stockton</p> <p>Mailing Address 5549 Knoll View Way</p> <p>City Sparks State NV Zip Code 89436</p> <p>Purpose of Disbursement Travel Expense</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>Transaction ID: SB21B.16695</p> <p>Date of Disbursement 10 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1555.15</p> <p>002 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2821.85

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)

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

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

NAME OF COMMITTEE (In Full)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
Roger Stockton

Transaction ID: SB21B.16689
Date of Disbursement

Mailing Address 1811 Newman PI

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

City Carson City State NV Zip Code 89703

Amount of Each Disbursement this Period

Purpose of Disbursement
PA system

003
Category/ Type

217.16

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Tristate Odyssey

Transaction ID: SB21B.16697
Date of Disbursement

Mailing Address 1817 N Stewart St

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	1	0

City Carson City State NV Zip Code 89706

Amount of Each Disbursement this Period

Purpose of Disbursement
staffing services

001
Category/ Type

3493.02

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

3710.18

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

7450.98

**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 62 / 70

<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)
WESTERN REPRESENTATION PAC

A.

Full Name (Last, First, Middle Initial)
RAND PAUL

Mailing Address 1332 ANDREA ST

City BOWLING GREEN State KY Zip Code 42104

Purpose of Disbursement
Contribution

Candidate Name
RAND PAUL

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

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19267
Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

5000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
99.1 FM Talk

Mailing Address
1960 Idaho St

City State Zip Code
Carson City NV 89701

Purpose of Expenditure Category/Type
radio ads 004

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought 68501.61

Date
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Amount
1200.00

Transaction ID: SE.11551

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
99.1 FM Talk

Mailing Address
1960 Idaho St

City State Zip Code
Carson City NV 89701

Purpose of Expenditure Category/Type
radio ad 004

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought 77825.60

Date
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Amount
1200.00

Transaction ID: SE.11716

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2400.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
CBS Radio - NEWSRADIO 840 KXNT

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

Mailing Address
6655 W. Sahara Ave. Suite D-110

Amount
2000.00

City State Zip Code
Las Vegas NV 89146

Transaction ID: SE.11538

Purpose of Expenditure Category/Type
Web banner 004

Office Sought: House State: NV
 Senate District: 00
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
70501.61

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
CBS Radio - NEWSRADIO 840 KXNT

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

Mailing Address
6655 W. Sahara Ave. Suite D-110

Amount
2130.00

City State Zip Code
Las Vegas NV 89146

Transaction ID: SE.11539

Purpose of Expenditure Category/Type
radio ad 004

Office Sought: House State: NV
 Senate District: 00
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
72631.61

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4130.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
CBS Radio - NEWSRADIO 840 KXNT

Mailing Address
6655 W. Sahara Ave. Suite D-110

City Las Vegas	State NV	Zip Code 89146
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Purpose of Expenditure radio ad	Category/ Type 004
------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	74431.61
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Amount
1800.00

Transaction ID: SE.11540

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
CBS Radio - NEWSRADIO 840 KXNT

Mailing Address
6655 W. Sahara Ave. Suite D-110

City Las Vegas	State NV	Zip Code 89146
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Purpose of Expenditure radio ad	Category/ Type 004
------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	79625.60
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Amount
1800.00

Transaction ID: SE.15590

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3600.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Newsmax Media Inc

Mailing Address
560 Billage Blvd #120

City West Palm Beach	State FL	Zip Code 33409
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Purpose of Expenditure Support email	Category/ Type 003
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	88700.60
---	----------

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

Amount
9075.00

Transaction ID: SE.15591

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Newsmax Media Inc

Mailing Address
560 Billage Blvd #120

City West Palm Beach	State FL	Zip Code 33409
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Purpose of Expenditure support email	Category/ Type 003
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	99700.60
---	----------

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

Amount
11000.00

Transaction ID: SE.15593

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	20075.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

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

B. Form/Schedule : **SE**
Transaction ID : **SE.15593**

This expenditure was reported on the October 20 Form 3X with a date of 9/13/2010 due to a data entry error. The correct date of the expenditure is 10/13/2010 and was included in the 24 hour report filed on 10/13/2010. An ammended Form 24 has been filed with the corrections FEC filing number FEC-709118.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Paramount Communications Group

Mailing Address
525-K East Market St #114

City Leesburg	State VA	Zip Code 20176
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Purpose of Expenditure Email support	Category/ Type 003
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	76625.60
---	----------

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

Amount
2193.99

Transaction ID: SE.11535

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Paramount Communications Group

Mailing Address
525-K East Market St #114

City Leesburg	State VA	Zip Code 20176
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Purpose of Expenditure email support	Category/ Type 003
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SEAN D BIELAT

Calendar Year-To-Date Per Election for Office Sought	626.78
---	--------

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

Amount
626.78

Transaction ID: SE.11536

Office Sought: House State: MA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2101

(a) SUBTOTAL of Itemized Independent Expenditures	2820.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC	FEC IDENTIFICATION NUMBER C C00461772
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Paramount Communications Group

Mailing Address
525-K East Market St #114

City Leesburg	State VA	Zip Code 20176
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Purpose of Expenditure email support	Category/ Type 003
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
JOSEPH W MILLER

Calendar Year-To-Date Per Election for Office Sought	6615.42
---	---------

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

Amount
262.01

Transaction ID: SE.11537

Office Sought: House State: AK
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Sierra Sage Magazine

Mailing Address
333 W. Proctor St

City Carson City	State NV	Zip Code 89703
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Purpose of Expenditure Print ad	Category/ Type 004
------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	100600.60
---	-----------

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

Amount
900.00

Transaction ID: SE.15594

Office Sought: House State: NV
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1162.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Roger Stockton
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WESTERN REPRESENTATION PAC		FEC IDENTIFICATION NUMBER C C00461772	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Townhall.com		Date M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 1 0	
Mailing Address 402 BNA Dr. Suite 400		Amount 15000.00	
City Nashville State TN Zip Code 37217		Transaction ID: SE.11541	
Purpose of Expenditure support email		Office Sought: <input checked="" type="checkbox"/> House State: MA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 003		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: SEAN D BIELAT		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		25241.18	

(a) SUBTOTAL of Itemized Independent Expenditures	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	49187.78
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Roger Stockton Signature	Date M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 1 0