

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Priority PAC

ADDRESS (number and street) P. O. Box 3683

Check if different than previously reported. (ACC) Little Rock AR 72203

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00388694

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
[X] January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11)
Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12)
Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R)
Convention (12C), Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2011 through 12 / 31 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Kevin Kennedy

Signature of Treasurer Mr. Kevin Kennedy [Electronically Filed] Date 01 / 18 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 7 columns for Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Priority PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		36590.26
(b) Cash on Hand at Beginning of Reporting Period.....	53876.70	
(c) Total Receipts (from Line 19) .....	52599.96	186458.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	106476.66	223048.63
7. Total Disbursements (from Line 31).....	83884.94	200456.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	22591.72	22591.72
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Priority PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2500.00	9750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500.00	9750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	45000.00	171500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	47500.00	181250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	99.96	208.37
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	52599.96	186458.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	52599.96	186458.37

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	46384.94	100456.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	46384.94	100456.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37500.00	100000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	83884.94	200456.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	83884.94	200456.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	47500.00	181250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47500.00	181250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	46384.94	100456.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46384.94	100456.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
	<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)  
**Priority PAC**

**A. J. Jonathan Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Freedom Lane  
 City Falls Church State VA Zip Code 22043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Peck, Madigan, Jones Occupation Consultant  
 Receipt For: 2014  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2011  
**Transaction ID : C6618157**  
 Amount of Each Receipt this Period  
 1000.00

**B. Mike McKay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6500 Debhill Lane  
 City Gainesville State VA Zip Code 20155-4457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Empire Consulting Group Occupation Principal  
 Receipt For: 2014  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2011  
**Transaction ID : C6908724**  
 Amount of Each Receipt this Period  
 1500.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

**A. 3M PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PAC 3M Center Building 224-6S-03  
City St. Paul State MN Zip Code 55144  
FEC ID number of contributing federal political committee. **C** C00084475  
Name of Employer Occupation  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 12 / 04 / 2011  
Transaction ID : **C6908737**  
Amount of Each Receipt this Period 2500.00

**B. AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)**  
Full Name (Last, First, Middle Initial)  
Mailing Address ONE PARKWAY CENTER SUITE 212  
City PITTSBURGH State PA Zip Code 15220  
FEC ID number of contributing federal political committee. **C** C00364109  
Name of Employer Occupation  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 12 / 28 / 2011  
Transaction ID : **C7044875**  
Amount of Each Receipt this Period 5000.00

**C. COMCAST CORP. POLITICAL ACTION COMMITTEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1701 JFK Boulevard, 49th Floor 35th Floor  
City Philadelphia State PA Zip Code 19103  
FEC ID number of contributing federal political committee. **C** C00248716  
Name of Employer Occupation  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 12 / 20 / 2011  
Transaction ID : **C7040171**  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 10000.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial)  
**A. DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL**

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN	State VA	Zip Code 22102
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FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2011  
**Transaction ID : C7044874**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. EASTMANPAC POLITICAL ACTION COMMITTEE OF EASTMAN C**

Mailing Address PO Box 431

City Kingsport	State TN	Zip Code 37662
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FEC ID number of contributing federal political committee. **C** C00113159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2011  
**Transaction ID : C6901463**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**C. EXPERIAN NORTH AMERICA INC. POLITICAL ACTION COMMI**

Mailing Address 475 Anton Blvd

City Costa Mesa	State CA	Zip Code 92626
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FEC ID number of contributing federal political committee. **C** C00379768

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2011  
**Transaction ID : C7040164**

Amount of Each Receipt this Period  
 3000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial)  
**A. INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL**

Mailing Address 1615 L Street NW  
Suite 900

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 15 / 2011

**Transaction ID : C6901465**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 16011 NE 36th Way  
Box 97017

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2011

**Transaction ID : C6618155**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. NAT.CABLE TELECOMMUN. ASSOC. PAC (NCTA PAC)**

Mailing Address 25 Massachusetts Avenue, NW #100

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2011

**Transaction ID : C6645410**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

**A. NAT.CABLE TELECOMMUN. ASSOC. PAC (NCTA PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Massachusetts Avenue, NW #100  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00010082  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2011  
**Transaction ID : C6901464**  
 Amount of Each Receipt this Period  
 3000.00

**B. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1325 Massachusetts Ave. NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00238725  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2011  
**Transaction ID : C6908729**  
 Amount of Each Receipt this Period  
 2500.00

**C. NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1771 N. Street, N.W.  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2011  
**Transaction ID : C6908718**  
 Amount of Each Receipt this Period  
 3000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

**A. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Daingerfield Road  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00030809  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2011  
**Transaction ID : C6911804**  
 Amount of Each Receipt this Period  
 2500.00

**B. NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1776 I Street, NW, 4th Floor  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00239848  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 04 / 2011  
**Transaction ID : C6908735**  
 Amount of Each Receipt this Period  
 2500.00

**C. TW TELECOM INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10475 PARK MEADOWS DRIVE  
 City LITTLEON State CO Zip Code 80124  
 FEC ID number of contributing federal political committee. **C** C00355941  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2011  
**Transaction ID : C6911805**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 31  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Priority PAC**

**A. WINE AND SPIRITS WHOLESALERS OF AMERICA INC. PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2011  
**Transaction ID : C6908733**

Amount of Each Receipt this Period  
2500.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

City	State	Zip Code
------	-------	----------

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	45000.00

# 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 13 OF 31
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

**A. First Security Bank**  
Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 17770

City Little Rock	State AR	Zip Code 72222
---------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.37

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2011

**Transaction ID : C6671578**

Amount of Each Receipt this Period  
24.34

\*

**B. First Security Bank**  
Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 17770

City Little Rock	State AR	Zip Code 72222
---------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.37

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2011

**Transaction ID : C6701479**

Amount of Each Receipt this Period  
20.79

\*

**C. First Security Bank**  
Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 17770

City Little Rock	State AR	Zip Code 72222
---------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.37

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : C7048140**

Amount of Each Receipt this Period  
17.87

\*

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial) <b>A. First Security Bank</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011 <b>Transaction ID : C7048141</b>
Mailing Address Post Office Box 17770		Amount of Each Receipt this Period 13.08
City Little Rock	State AR	Zip Code 72222
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.37	*

Full Name (Last, First, Middle Initial) <b>B. First Security Bank</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2011 <b>Transaction ID : C7048142</b>
Mailing Address Post Office Box 17770		Amount of Each Receipt this Period 9.55
City Little Rock	State AR	Zip Code 72222
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.37	*

Full Name (Last, First, Middle Initial) <b>C. First Security Bank</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2011 <b>Transaction ID : C7048143</b>
Mailing Address Post Office Box 17770		Amount of Each Receipt this Period 14.33
City Little Rock	State AR	Zip Code 72222
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.37	*

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	36.96
<b>TOTAL</b> This Period (last page this line number only).....▶	99.96

**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 OF 31
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

**A. CHAD CAUSEY FOR CONGRESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 16966  
City JONESBORO State AR Zip Code 72403  
FEC ID number of contributing federal political committee. **C** C00475384  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
2010 Primary Runoff  
Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2011  
**Transaction ID : C7050268**  
Amount of Each Receipt this Period  
5000.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA16

Transaction ID : C7050268

Refund for undesignated 3/30/11 contribution / Debt Retirement - 2010 Primary Runoff

Form/Schedule:

Transaction ID:



**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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 53853

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2011

Transaction ID : D452977

Amount of Each Disbursement this Period

57.95

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 53853

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 18 / 2011

Transaction ID : D452978

Amount of Each Disbursement this Period

29.05

Full Name (Last, First, Middle Initial)

**C. ARDEMGAZ Moses Tucker Real Estate, Inc**

Mailing Address 200 Commerce St  
Ste 300

City Little Rock State AR Zip Code 72201-1770

Purpose of Disbursement  
PAC Rent for HQ

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2011

Transaction ID : D432565

Amount of Each Disbursement this Period

300.00

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

387.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. ARDEMGAZ Moses Tucker Real Estate, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2011

Mailing Address 200 Commerce St  
Ste 300

City Little Rock State AR Zip Code 72201-1770

**Transaction ID : D436963**

Purpose of Disbursement  
PAC HQ Rent

001
Category/ Type

Amount of Each Disbursement this Period

300.00
--------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ARDEMGAZ Moses Tucker Real Estate, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2011

Mailing Address 200 Commerce St  
Ste 300

City Little Rock State AR Zip Code 72201-1770

**Transaction ID : D439703**

Purpose of Disbursement  
PAC HQ Rent

001
Category/ Type

Amount of Each Disbursement this Period

300.00
--------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. ARDEMGAZ Moses Tucker Real Estate, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2011

Mailing Address 200 Commerce St  
Ste 300

City Little Rock State AR Zip Code 72201-1770

**Transaction ID : D443013**

Purpose of Disbursement  
PAC HQ Rent

001
Category/ Type

Amount of Each Disbursement this Period

300.00
--------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

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

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

900.00
--------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. ARDEMGAZ Moses Tucker Real Estate, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2011

Mailing Address 200 Commerce St  
Ste 300

City Little Rock State AR Zip Code 72201-1770

**Transaction ID : D446398**

Purpose of Disbursement  
PAC HQ Rent

001
Category/ Type

Amount of Each Disbursement this Period

300.00
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ARDEMGAZ Moses Tucker Real Estate, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2011

Mailing Address 200 Commerce St  
Ste 300

City Little Rock State AR Zip Code 72201-1770

**Transaction ID : D448422**

Purpose of Disbursement  
PAC HQ Rent

001
Category/ Type

Amount of Each Disbursement this Period

300.00
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Walt Elizabeth**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2011

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

**Transaction ID : D448426**

Purpose of Disbursement  
PAC FEC Admin./Consult

001
Category/ Type

Amount of Each Disbursement this Period

1250.00
---------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

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

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

1850.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Walt Elizabeth**

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

Purpose of Disbursement  
PAC FEC Admin./Consult.

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2011

Transaction ID : D447029

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. Walt Elizabeth**

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

Purpose of Disbursement  
PAC FEC Admin./Consultant

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2011

Transaction ID : D432379

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Walt Elizabeth**

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

Purpose of Disbursement  
PAC FEC Admin./Consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2011

Transaction ID : D439700

Amount of Each Disbursement this Period

1250.00

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

3750.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Walt Elizabeth**

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

Purpose of Disbursement  
PAC FEC Admin./Consult.

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2011

**Transaction ID : D441874**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. Walt Elizabeth**

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

Purpose of Disbursement  
PAC FEC Admin./Consult.

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2011

**Transaction ID : D436967**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Walt Elizabeth**

Mailing Address P. O. Box 100

City Altheimer State AR Zip Code 72004

Purpose of Disbursement  
PAC FEC Admin./Consult.

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 29 / 2011

**Transaction ID : D450796**

Amount of Each Disbursement this Period

1250.00

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

3750.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Federal Express Corporation**

Mailing Address 101 Constitution Ave NW  
Suite 801 East

City Washington State DC Zip Code 20001-2133

Purpose of Disbursement  
tickets/food and beverage

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2011

**Transaction ID : D449348**

Amount of Each Disbursement this Period

6689.04

Full Name (Last, First, Middle Initial)

**B. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2011

**Transaction ID : D449367**

Amount of Each Disbursement this Period

98.95

Full Name (Last, First, Middle Initial)

**C. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2011

**Transaction ID : D444248**

Amount of Each Disbursement this Period

10.00

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

6797.99

**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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2011

Transaction ID : D448064

Amount of Each Disbursement this Period

39.95

Full Name (Last, First, Middle Initial)

**B. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2011

Transaction ID : D436668

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2011

Transaction ID : D442997

Amount of Each Disbursement this Period

10.00

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

59.95

**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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement  
merchant fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D440028**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. NGP Software, Inc.**

Mailing Address 1225 I St NW  
Ste 1225

City Washington State DC Zip Code 20005-5918

Purpose of Disbursement  
PAC Database Software

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D443001**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. NGP Software, Inc.**

Mailing Address 1225 I St NW  
Ste 1225

City Washington State DC Zip Code 20005-5918

Purpose of Disbursement  
PAC Database Software

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D432376**

Amount of Each Disbursement this Period

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

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**

Mailing Address 1201 Third Avenue, 40th Floor

City Alhambra State CA Zip Code 91801

Purpose of Disbursement  
Legal Services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D444239

Amount of Each Disbursement this Period

1	7	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Postmaster, US Postal Service**

Mailing Address Main Office, 600 E. Capitol

City Little Rock State AR Zip Code 72202

Purpose of Disbursement  
PAC PO Box Rental

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D444238

Amount of Each Disbursement this Period

1	1	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC Fundraising/Consulting

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D448421

Amount of Each Disbursement this Period

4	0	0	.	0	0
---	---	---	---	---	---

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

4	2	8	.	0	0
---	---	---	---	---	---

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

4	2	8	.	0	0
---	---	---	---	---	---

**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)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC Fundraising/Consulting

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2011

**Transaction ID : D447021**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC fundraising/Consulting

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2011

**Transaction ID : D432378**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC Fundraising/Consulting

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 08 / 2011

**Transaction ID : D438647**

Amount of Each Disbursement this Period

4000.00

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

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

12000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC fundraising/consulting

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D439699**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC Fundraising/Consulting

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D441875**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Schimanski and Associates**

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
PAC Fundraising/Consulting

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D450793**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	2	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

4	6	3	8	4	9	4	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. BEN CARDIN FOR SENATE**

Mailing Address P.O. BOX 21093

City State Zip Code  
CATONSVILLE MD 21228

Purpose of Disbursement  
contribution

011

Candidate Name  
**BENJAMIN L CARDIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2011

Transaction ID : D449887

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. BILL NELSON FOR U S SENATE**

Mailing Address 972 W WHITMIRE DRIVE

City State Zip Code  
MELBOURNE FL 32935

Purpose of Disbursement  
contribution

011

Candidate Name  
**BILL NELSON**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2011

Transaction ID : D449893

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. BOB CASEY FOR SENATE INC**

Mailing Address 30 SOUTH 15TH STREET SUITE 400

City State Zip Code  
PHILADELPHIA PA 19102

Purpose of Disbursement  
contribution

011

Candidate Name  
**ROBERT P JR P. CASEY Jr.**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 21 / 2011

Transaction ID : D449888

Amount of Each Disbursement this Period

2500.00

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

7500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. CHAD CAUSEY FOR CONGRESS**

Mailing Address PO BOX 16966

City JONESBORO State AR Zip Code 72403

Purpose of Disbursement  
2010 Primary Runoff Debt retirement

011

Candidate Name  
**Chad Causey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
2010 Primary Runoff

State: AR District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2011

Transaction ID : D449361

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. HEIDI FOR SENATE**

Mailing Address PO BOX 1577

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement  
contribution

011

Candidate Name  
**HEIDI HEITKAMP**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: ND District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 21 / 2011

Transaction ID : D449889

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. KAINE FOR VIRGINIA**

Mailing Address 1515 CONFEDERATE AVE

City RICHMOND State VA Zip Code 23227

Purpose of Disbursement  
contribution

011

Candidate Name  
**Mr. TIMOTHY MICHAEL Michael KAINE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: VA District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 21 / 2011

Transaction ID : D449891

Amount of Each Disbursement this Period

2500.00

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

12500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. MCCASKILL FOR MISSOURI 2012**

Mailing Address 700 13TH STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
contribution

011

Candidate Name  
**CLAIRE MCCASKILL**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

Transaction ID : D449886

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Montanans for Tester**

Mailing Address PO BOX 1135

City Helena State MT Zip Code 59624

Purpose of Disbursement  
contribution

011

Candidate Name  
**Jon Tester**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 12 / 2011

Transaction ID : D444240

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Stabenow for US Senate**

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement  
contribution

011

Candidate Name  
**DEBBIE STABENOW**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

Transaction ID : D449885

Amount of Each Disbursement this Period

5000.00

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

12500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Priority PAC**

Full Name (Last, First, Middle Initial)

**A. Whitehouse for Senate**

Mailing Address P. O. Box 40280

City Providence State RI Zip Code 02940

Purpose of Disbursement  
contribution

011

Category/  
Type

Candidate Name

**Sheldon Whitehouse II**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2011

**Transaction ID : D441866**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

5000.00

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

37500.00