

# 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

House Majority PAC

ADDRESS (number and street) 700 13th Street, NW

Check if different than previously reported. (ACC) Suite 600

Washington DC 20005

2. **FEC IDENTIFICATION NUMBER ▼** C00495028 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on 06 / 12 / 2012 in the State of AZ

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

Election on   /   /   in the State of  

5. Covering Period 05 / 17 / 2012 through 05 / 23 / 2012

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 Shannon Roche

Signature of Treasurer Shannon Roche *[Electronically Filed]* Date 07 / 12 / 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.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

House Majority 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="2012"/>		<input type="text" value="1173093.22"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1927695.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="225441.00"/>	<input type="text" value="2870574.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2153136.24"/>	<input type="text" value="4043667.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="229457.72"/>	<input type="text" value="2119988.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1923678.52"/>	<input type="text" value="1923678.52"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="67144.98"/>	

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

**House Majority 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).....	222350.00	1974128.59
(ii) Unitemized .....	3091.00	8876.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	225441.00	1983005.09
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	887500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	225441.00	2870505.09
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	68.91
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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))..... ▶	225441.00	2870574.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	225441.00	2870574.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	-74870.38	721523.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-74870.38	721523.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	304328.10	1383464.88
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)) ..	229457.72	2119988.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	229457.72	2119988.70

**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) .....	225441.00	2870505.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	225441.00	2870505.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	-74870.38	721523.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	68.91
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-74870.38	721454.91

**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 23
	<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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)  
**A. Matthew Bergman**

Mailing Address **PO Box 2010**

City **Vashon** State **WA** Zip Code **98070-2010**

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

Name of Employer **Bergman Draper Ladenburg** Occupation **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt  
**05 / 20 / 2012**

**Transaction ID : C8785519**

Amount of Each Receipt this Period  
**10000.00**

Full Name (Last, First, Middle Initial)  
**B. James L. Brooks**

Mailing Address **10100 Santa Monica Boulevard Suite 1050**

City **Los Angeles** State **CA** Zip Code **90067**

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

Name of Employer **Gracie Films** Occupation **Producer**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
**05 / 23 / 2012**

**Transaction ID : C8813870**

Amount of Each Receipt this Period  
**5000.00**

Full Name (Last, First, Middle Initial)  
**c. Jeffrey R. Gural**

Mailing Address **125 Park Avenue**

City **New York** State **NY** Zip Code **10017**

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

Name of Employer **Newmark Knight Frank** Occupation **Chairman**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt  
**05 / 22 / 2012**

**Transaction ID : C8803286**

Amount of Each Receipt this Period  
**10000.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **25000.00**

**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 7 OF 23
	(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"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**House Majority PAC**

**A. Cindy Harrell-Horn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 St. Cloud Road  
 City Los Angeles State CA Zip Code 90077  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012  
**Transaction ID : C8803282**  
 Amount of Each Receipt this Period  
 100000.00

**B. Peter A. Kraus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4906 Shadywood Lane  
 City Dallas State TX Zip Code 75209-2024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Waters, Kraus & Paul Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012  
**Transaction ID : C8778771**  
 Amount of Each Receipt this Period  
 25000.00

**C. Brian Powers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3212 38th St NW  
 City Washington State DC Zip Code 20016-3729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer O'Donoghue & O'Donoghue Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2012  
**Transaction ID : C8783964**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126000.00
<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 8 OF 23
<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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)  
**A. Service Employees International Union**

Mailing Address 1800 Massachusetts Avenue, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
91000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2012  
**Transaction ID : C8783216**

Amount of Each Receipt this Period  
 71000.00

Full Name (Last, First, Middle Initial)  
**B. Lewis Wooldridge**

Mailing Address 520 Holly Ave

City Oxnard	State CA	Zip Code 93036-1905
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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 ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2012  
**Transaction ID : C8785535**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**C. Melvin Shapiro**

Mailing Address 3930 Centre St

City San Diego	State CA	Zip Code 92103-3452
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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 ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 10 / 2012  
**Transaction ID : C8791022A**

Amount of Each Receipt this Period  
 100.00

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	71350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 23  
(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)  
**House Majority PAC**

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3201.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : C8791022AB**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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  
MM / DD / YYYY

Amount of Each Receipt this Period

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

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  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	222350.00

**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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. 4C Partners, LLC**

Date of Disbursement: MM / DD / YYYY  
05 / 17 / 2012

Mailing Address 718 Seventh Street, NW  
Suite 300

City Washington State DC Zip Code 20001

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **D624841**

Amount of Each Disbursement this Period: 10000.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. Citibank**

Date of Disbursement: MM / DD / YYYY  
05 / 18 / 2012

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **D618186**

Amount of Each Disbursement this Period: 14.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. Citibank**

Date of Disbursement: MM / DD / YYYY  
05 / 18 / 2012

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : **D618187**

Amount of Each Disbursement this Period: 14.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10028.00

**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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618188**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618189**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618190**

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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618191**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618192**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618193**

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

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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Citibank**

Mailing Address 1400 G Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : D618194**

Amount of Each Disbursement this Period

11.00

Full Name (Last, First, Middle Initial)

**B. Brooke Joseph**

Mailing Address 1589 Brandywine Road

City San Mateo State CA Zip Code 94402

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

**Transaction ID : D617974**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Kieloch Consulting, Inc.**

Mailing Address 228 Second Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

**Transaction ID : D617969**

Amount of Each Disbursement this Period

15000.00

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

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

20011.00

**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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Alixandria Lapp**

Mailing Address 114 S. Cherry Street

City Falls Church State VA Zip Code 22046

Purpose of Disbursement  
Travel & Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 23 / 2012

**Transaction ID : D618220**

Amount of Each Disbursement this Period

1932.34

Full Name (Last, First, Middle Initial)

**B. Mack Crouse Group**

Mailing Address 2001 N. Beauregard Street

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : D618229**

Amount of Each Disbursement this Period

21931.24

Full Name (Last, First, Middle Initial)

**C. Mack Crouse Group**

Mailing Address 2001 N. Beauregard Street

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : D618230**

Amount of Each Disbursement this Period

21931.24

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

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

45794.82

**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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Mack Crouse Group**

Mailing Address 2001 N. Beauregard Street

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Direct Mail - See Previous Report

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : D618198**

Amount of Each Disbursement this Period

22911.47

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Mack Crouse Group**

Mailing Address 2001 N. Beauregard Street

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Direct Mail - See Previous Report

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : D618200**

Amount of Each Disbursement this Period

21931.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Mack Crouse Group**

Mailing Address 2001 N. Beauregard Street

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Direct Mail - See Previous Report

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2012

**Transaction ID : D618202**

Amount of Each Disbursement this Period

21931.24

[MEMO ITEM]

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

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

0.00

**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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Yuichi Miyamoto**

Mailing Address 236 Massachusetts Avenue, NE  
Suite 603

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : D617967

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. New Blue Interactive**

Mailing Address 4906 Glen Cove Parkway

City Bethesda State MD Zip Code 20816

Purpose of Disbursement  
Online Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : D617965

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

**C. Shannon Roche**

Mailing Address 1307 Wallach Place NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Office Equipment/Travel/Phone/Office Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : D616767

Amount of Each Disbursement this Period

2840.99

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

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

11340.99

**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)  
**House Majority PAC**

Full Name (Last, First, Middle Initial)

**A. Waterfront Strategies**

Mailing Address 1010 Wisconsin Avenue, NW  
Suite 800

City Washington State DC Zip Code 20007

Purpose of Disbursement  
See Schedule E

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618226**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Waterfront Strategies**

Mailing Address 1010 Wisconsin Avenue, NW  
Suite 800

City Washington State DC Zip Code 20007

Purpose of Disbursement  
See Schedule E

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D618227**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
House Majority PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mack Crouse Group</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 2001 N. Beauregard Street	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 22911.47	Transaction ID : D617314	
Amount Incurred This Period 0.00	Payment This Period 22911.47	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mack Crouse Group</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 2001 N. Beauregard Street	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 21931.24	Transaction ID : D617315	
Amount Incurred This Period 0.00	Payment This Period 21931.24	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mack Crouse Group</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 2001 N. Beauregard Street	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 21931.24	Transaction ID : D617317	
Amount Incurred This Period 0.00	Payment This Period 21931.24	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
House Majority PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Perkins Coie LLP</b>	Nature of Debt (Purpose): Legal & Accounting Services
Mailing Address 700 13th Street, NW Suite 600	
City State Washington DC Zip Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="33069.81"/>	<b>Transaction ID : D616982</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="33069.81"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Shorr Johnson Magnus</b>	Nature of Debt (Purpose): Media Production Costs
Mailing Address 1831 Chestnut Street Sixth Floor	
City State Philadelphia PA Zip Code 19103	

Outstanding Balance Beginning This Period <input type="text" value="14683.65"/>	<b>Transaction ID : D617316</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14683.65"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>	Nature of Debt (Purpose): Media Production Costs
Mailing Address 1010 Wisconsin Avenue, NW Suite 800	
City State Washington DC Zip Code 20007	

Outstanding Balance Beginning This Period <input type="text" value="12521.85"/>	<b>Transaction ID : D617313</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12521.85"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="60275.31"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 23
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**House Majority PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Waterfront Strategies</b>	Nature of Debt (Purpose): Media Production Costs
Mailing Address 1010 Wisconsin Avenue, NW Suite 800	
City State Zip Code Washington DC 20007	

Outstanding Balance Beginning This Period <input type="text" value="6869.67"/>	<b>Transaction ID : D627229</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6869.67"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="6869.67"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="67144.98"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="67144.98"/>



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00495028
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b> Special General		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 1010 Wisconsin Avenue, NW Suite 800		Amount 108282.90
City Washington	State DC	Zip Code 20007
Purpose of Expenditure Television Advertising	Category/Type	<b>Transaction ID : D615669</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Jesse Kelly		Office Sought: <input checked="" type="checkbox"/> House    State: AZ <input type="checkbox"/> Senate    District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
231249.45		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special General</u>

Full Name (Last, First, Middle Initial) of Payee <b>Mack Crouse Group</b>		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 2001 N. Beauregard Street		Amount 22911.47
City Alexandria	State VA	Zip Code 22311
Purpose of Expenditure Direct Mail - See Previous Report	Category/Type	<b>Transaction ID : D618197</b>
Name of Federal Candidate Supported or Opposed by Expenditure: Linda Parks		Office Sought: <input checked="" type="checkbox"/> House    State: CA <input type="checkbox"/> Senate    District: 26 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
564782.47		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	131194.37
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

Shannon Roche  
Signature

[Electronically Filed]    Date MM / DD / YYYY  
07 / 12 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>House Majority PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00495028
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Mack Crouse Group</b>		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 2001 N. Beauregard Street		Amount 21931.24
City Alexandria	State VA	
Zip Code 22311	<b>Transaction ID : D618199</b>	
Purpose of Expenditure Direct Mail - See Previous Report	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: CA <input type="checkbox"/> Senate    District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Linda Parks		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 564782.47		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Mack Crouse Group</b>		Date MM / DD / YYYY 05 / 18 / 2012
Mailing Address 2001 N. Beauregard Street		Amount 21931.24
City Alexandria	State VA	
Zip Code 22311	<b>Transaction ID : D618201</b>	
Purpose of Expenditure Direct Mail - See Previous Report	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: CA <input type="checkbox"/> Senate    District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Linda Parks		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 564782.47		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	43862.48
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	304328.10

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.

*Shannon Roche*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
07 / 12 / 2012