

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PACPLUS

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6209.72"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="73854.44"/>	<input type="text" value="80304.44"/>
(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="80064.16"/>	<input type="text" value="80304.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="48700.57"/>	<input type="text" value="48940.85"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31363.59"/>	<input type="text" value="31363.59"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

PACPLUS

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).....	7000.00	7000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7000.00	7000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7000.00	7000.00
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.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	66854.44	73304.44
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))..... ▶	73854.44	80304.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	73854.44	80304.44

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	6500.00
24. Independent Expenditures (use Schedule E)	28700.00	28700.00
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	13500.57	13740.85
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)) ..	48700.57	48940.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48700.57	48940.85

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)	7000.00	7000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7000.00	7000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)
A. Susan Sandler

Mailing Address 553 Arkansas St.

City San Francisco State CA Zip Code 94107

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

Name of Employer Self-Employed Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012
Transaction ID : SA11AI.6643

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Carol H Tolan

Mailing Address 150 Columbus Ave., PH1A

City New York State NY Zip Code 10023

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2012
Transaction ID : SA11AI.4822

Amount of Each Receipt this Period
2000.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	7000.00

**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 34
<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)
PACPLUS

A. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

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
04	/	05	/	2012

Transaction ID : SA17.6654

Amount of Each Receipt this Period

350.58

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

B. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2012

Transaction ID : SA17.6657

Amount of Each Receipt this Period

681.95

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

C. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2012

Transaction ID : SA17.6658

Amount of Each Receipt this Period

835.61

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 34
<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)
PACPLUS

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Receipt MM / DD / YYYY 04 / 27 / 2012
Mailing Address P.O. Box 382110		Transaction ID : SA17.6659
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 259.32	
Name of Employer	Occupation	Noncontribution Account. Total earmarked through conduit; PAC limit not affected.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Receipt MM / DD / YYYY 05 / 03 / 2012
Mailing Address P.O. Box 382110		Transaction ID : SA17.6660
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 413.00	
Name of Employer	Occupation	Noncontribution Account. Total earmarked through conduit; PAC limit not affected.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. ActBlue		Date of Receipt MM / DD / YYYY 05 / 14 / 2012
Mailing Address P.O. Box 382110		Transaction ID : SA17.6662
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 845.23	
Name of Employer	Occupation	Noncontribution Account. Total earmarked through conduit; PAC limit not affected.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
<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)
PACPLUS

Full Name (Last, First, Middle Initial)
A. ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

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
05 / 21 / 2012

Transaction ID : SA17.6661

Amount of Each Receipt this Period
672.33

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

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
05 / 23 / 2012

Transaction ID : SA17.6663

Amount of Each Receipt this Period
777.97

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

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
05 / 31 / 2012

Transaction ID : SA17.6674

Amount of Each Receipt this Period
6440.13

Noncontrib account. Total earmarked through conduit. PAC limit not affected.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
<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)
PACPLUS

A. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2012

Transaction ID : SA17.6665

Amount of Each Receipt this Period

542.64

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

B. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2012

Transaction ID : SA17.6666

Amount of Each Receipt this Period

812.57

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

C. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2012

Transaction ID : SA17.6668

Amount of Each Receipt this Period

561.85

Noncontribution Account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 34
<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)
PACPLUS

A. Stephanie Anello
Full Name (Last, First, Middle Initial)
Mailing Address 2277 Star Lilly Ct.
City Brentwood State CA Zip Code 94513
FEC ID number of contributing federal political committee. **C**
Name of Employer Antioch Unified School Dist. Occupation Associate Superintendent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 04 / 2012
Transaction ID : SA17.5623
Amount of Each Receipt this Period 240.00
Non-contribution account

B. Keith Archuleta
Full Name (Last, First, Middle Initial)
Mailing Address 1883 Mt. Conness Way
City Antioch State CA Zip Code 94531
FEC ID number of contributing federal political committee. **C**
Name of Employer Emerald Consulting Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 12 / 2012
Transaction ID : SA17.5670
Amount of Each Receipt this Period 240.00
Non-contribution account. Earmarked through ActBlue

C. Keith Archuleta
Full Name (Last, First, Middle Initial)
Mailing Address 1883 Mt. Conness Way
City Antioch State CA Zip Code 94531
FEC ID number of contributing federal political committee. **C**
Name of Employer Emerald Consulting Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 18 / 2012
Transaction ID : SA17.5671
Amount of Each Receipt this Period 20.00
Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
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 12 OF 34
<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)
PACPLUS

Full Name (Last, First, Middle Initial)
A. Robert Bass

Mailing Address 2277 Star Lilly Ct.

City Brentwood	State CA	Zip Code 94513
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mt. Diablo Unified School Dist	Occupation Vice Principal
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	04	/	2012

Transaction ID : SA17.5628

Amount of Each Receipt this Period
240.00

Non-contribution account

Full Name (Last, First, Middle Initial)
B. Gary Beberman

Mailing Address 697 Douglass St.

City San Francisco	State CA	Zip Code 94114
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FEC ID number of contributing federal political committee. **C**

Name of Employer LFP	Occupation Jack of all trades
-------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	27	/	2012

Transaction ID : SA17.5863

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

Full Name (Last, First, Middle Initial)
C. Stephen Bingham

Mailing Address 353 Hibiscus Way

City San Rafael	State CA	Zip Code 94903
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bay Area Legal Aid	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	26	/	2012

Transaction ID : SA17.6645

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	720.00
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 13 OF 34
<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)
PACPLUS

A. Donna Bransford
Full Name (Last, First, Middle Initial)

Mailing Address 3068 Birdsau Ave

City Oakland	State CA	Zip Code 94619
-----------------	-------------	-------------------

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

Name of Employer DNB Strategie Consulting	Occupation Consultant
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2012

Transaction ID : SA17.5792

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

B. Cedric Brown
Full Name (Last, First, Middle Initial)

Mailing Address 565 Bellevue Ave #907

City Oakland	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer Kapor Foundation	Occupation CEO
--------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2012

Transaction ID : SA17.5864

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

C. Helen Cagampang
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Fresno Ave.

City Berkeley	State CA	Zip Code 94707
------------------	-------------	-------------------

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

Name of Employer None	Occupation Not Employed
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2012

Transaction ID : SA17.5779

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	720.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 34
<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)
PACPLUS

A. Helen Cagampang
Full Name (Last, First, Middle Initial)
Mailing Address 1015 Fresno Ave.
City Berkeley State CA Zip Code 94707
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Not Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 01 / 2012
Transaction ID : SA17.5780
Amount of Each Receipt this Period 20.00
Non-contribution account. Earmarked through ActBlue

B. Gregory Cendana
Full Name (Last, First, Middle Initial)
Mailing Address 1810 California NW St., Apt 101
City Washington State DC Zip Code 20009
FEC ID number of contributing federal political committee. **C**
Name of Employer APALA, AFL-CIO Occupation Executive Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 16 / 2012
Transaction ID : SA17.5730
Amount of Each Receipt this Period 240.00
Non-contribution account. Earmarked through ActBlue

C. Charic Daniels
Full Name (Last, First, Middle Initial)
Mailing Address 3502 S MacGregor Way
City Houston State TX Zip Code 77021
FEC ID number of contributing federal political committee. **C**
Name of Employer Exxon Mobil Corporation Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2012
Transaction ID : SA17.5721
Amount of Each Receipt this Period 500.00
Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional)..... ▶ 760.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 34
<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)
PACPLUS

Full Name (Last, First, Middle Initial)
A. Deborah Drysdale

Mailing Address 270 Moncada Way

City San Francisco State CA Zip Code 94127

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2012
Transaction ID : SA17.5813

Amount of Each Receipt this Period
500.00

Non-contribution account. Earmarked through ActBlue

Full Name (Last, First, Middle Initial)
B. Amy Epstein

Mailing Address 1467 Shotwell St.

City San Francisco State CA Zip Code 94110

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

Name of Employer Leadership Public Schools Occupation Public School Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2012
Transaction ID : SA17.5786

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

Full Name (Last, First, Middle Initial)
C. Salvatore N Evola

Mailing Address P.O. Box 647

City Pittsburg State CA Zip Code 94565

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

Name of Employer City of Pittsburg Occupation Council Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2012
Transaction ID : SA17.5679

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	980.00
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 16 OF 34
<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)
PACPLUS

A. David Foecke
Full Name (Last, First, Middle Initial)

Mailing Address 3068 Birdsall Ave

City Oakland State CA Zip Code 94619

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA17.5795

Amount of Each Receipt this Period
 240.00

Non-contribution account. Earmarked through ActBlue

B. Baryn Futa
Full Name (Last, First, Middle Initial)

Mailing Address 302 Garfield St.

City Denver State CO Zip Code 80206

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA17.5724

Amount of Each Receipt this Period
 240.00

Non-contribution account. Earmarked through ActBlue

C. Kim Geron
Full Name (Last, First, Middle Initial)

Mailing Address 332 Sunset Blvd. #3

City Hayward State CA Zip Code 94541

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

Name of Employer California State University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA17.5894

Amount of Each Receipt this Period
 240.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	720.00
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 17 OF 34
<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)
PACPLUS

Full Name (Last, First, Middle Initial) A. Kristin Hull		Date of Receipt MM / DD / YYYY 06 / 28 / 2012 Transaction ID : SA17.5883
Mailing Address 341 El Cerrito Ave.		Amount of Each Receipt this Period 1000.00 Non-contribution account. Earmarked through ActBlue
City Piedmont	State CA	Zip Code 94611
FEC ID number of contributing federal political committee. C	Name of Employer Matcap	Occupation Educational Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Willie Mims		Date of Receipt MM / DD / YYYY 04 / 04 / 2012 Transaction ID : SA17.5639
Mailing Address 954 Newcastle Way		Amount of Each Receipt this Period 240.00 Non-contribution account
City Pittsburg	State CA	Zip Code 94565
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Joyce Newstat		Date of Receipt MM / DD / YYYY 04 / 03 / 2012 Transaction ID : SA17.5622
Mailing Address 163 Beaumont Ave		Amount of Each Receipt this Period 500.00 Non-contribution account. Earmarked through ActBlue
City San Francisco	State CA	Zip Code 94118
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1740.00
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 18 OF 34
<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)
PACPLUS

A. John O'Toole
Full Name (Last, First, Middle Initial)

Mailing Address 1368 Trestle Glen Road

City Oakland	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer Lawyer	Occupation Nat. Center for Youth Law
----------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2012

Transaction ID : SA17.5805

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

B. Masood Ordikhani
Full Name (Last, First, Middle Initial)

Mailing Address 91 Iris Ave.

City San Francisco	State CA	Zip Code 94118
-----------------------	-------------	-------------------

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

Name of Employer City & County of San Francisco	Occupation Manager
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2012

Transaction ID : SA17.5722

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

C. Rafael Perales
Full Name (Last, First, Middle Initial)

Mailing Address 2193 Mill Rd.

City Flint	State MI	Zip Code 48532
---------------	-------------	-------------------

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

Name of Employer Great Lakes Metal Works	Occupation Owner
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2012

Transaction ID : SA17.5766

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	720.00
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 19 OF 34
<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)
PACPLUS

Full Name (Last, First, Middle Initial) A. Gary Phillips		Date of Receipt MM / DD / YYYY 04 / 23 / 2012 Transaction ID : SA17.5707
Mailing Address 1309 S. Sierra Bonita Ave.		Amount of Each Receipt this Period 240.00
City Los Angeles	State CA	Zip Code 90019
FEC ID number of contributing federal political committee. C		Non-contribution account
Name of Employer FreeLance	Occupation Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Steve Phillips		Date of Receipt MM / DD / YYYY 04 / 29 / 2012 Transaction ID : SA17.5553
Mailing Address 553 Arkansas St.		Amount of Each Receipt this Period 10.00
City San Francisco	State CA	Zip Code 94107
FEC ID number of contributing federal political committee. C		Non-contribution account. Earmarked through ActBlue
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4835.00	

Full Name (Last, First, Middle Initial) C. Steve Phillips		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : SA17.5554
Mailing Address 553 Arkansas St.		Amount of Each Receipt this Period 10000.00
City San Francisco	State CA	Zip Code 94107
FEC ID number of contributing federal political committee. C		Non-contribution account
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 14835.00	

SUBTOTAL of Receipts This Page (optional).....▶	10250.00
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 20 OF 34
<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)
PACPLUS

A. PowerPAC.org
Full Name (Last, First, Middle Initial)
Mailing Address 44 Montgomery St., Suite 2310

City San Francisco	State CA	Zip Code 94104
-----------------------	-------------	-------------------

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2012

Transaction ID : SA17.5755

Amount of Each Receipt this Period
20000.00

Non-contribution account

B. Deborah Salkind
Full Name (Last, First, Middle Initial)
Mailing Address 245m Mt Hermon Rd. #332

City Scotts Valley	State CA	Zip Code 95066
-----------------------	-------------	-------------------

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

Name of Employer Homemaker	Occupation N/A
-------------------------------	-------------------

Receipt For:
 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
06	/	29	/	2012

Transaction ID : SA17.5897

Amount of Each Receipt this Period
2500.00

Non-contribution account. Earmarked through ActBlue

C. Michael Schmitz
Full Name (Last, First, Middle Initial)
Mailing Address 1629 Moreland Drive

City Alameda	State CA	Zip Code 94501
-----------------	-------------	-------------------

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

Name of Employer ICLEI	Occupation Executive Director
---------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2012

Transaction ID : SA17.5754

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....	22740.00
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 21 OF 34
<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)
PACPLUS

A. Jane Segal
Full Name (Last, First, Middle Initial)

Mailing Address 315 Eureka St.

City San Francisco	State CA	Zip Code 94114
-----------------------	-------------	-------------------

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

Name of Employer Natl Fdn Teaching Entrepreneur	Occupation Professor
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2012

Transaction ID : SA17.5899

Amount of Each Receipt this Period
7000.00

Non-contribution account

B. Carol H Tolan
Full Name (Last, First, Middle Initial)

Mailing Address 150 Columbus Ave., PH1A

City New York	State NY	Zip Code 10023
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2012

Transaction ID : SA17.5712

Amount of Each Receipt this Period
13000.00

Non-contribution account

C. Sylvia Trujillo
Full Name (Last, First, Middle Initial)

Mailing Address 350 G Street SW #625

City Washington	State DC	Zip Code 20024
--------------------	-------------	-------------------

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

Name of Employer American Medical Association	Occupation Lawyer
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2012

Transaction ID : SA17.5658

Amount of Each Receipt this Period
100.00

Non-contribution account. Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	20100.00
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 22 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)
A. Michael Wald

Mailing Address 845 Ashbury St.

City State Zip Code
San Francisco CA 94117

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

Name of Employer Occupation
Stanford Law School Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2012
Transaction ID : SA17.5785

Amount of Each Receipt this Period
240.00

Non-contribution account. Earmarked through ActBlue

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00

TOTAL This Period (last page this line number only)..... ▶ 60190.00

**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 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)
PACPLUS

Full Name (Last, First, Middle Initial)

A. Hector Balderas

Mailing Address 500 Marquette NW #240

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement

011

Category/
Type

Candidate Name

Balderas for New Mexico

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2012

Transaction ID : SB23.4823

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Griego for Congress

Mailing Address P.O. Box 19352

City Albuquerque State NM Zip Code 87119

Purpose of Disbursement

011

Category/
Type

Candidate Name

Griego for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2012

Transaction ID : SB23.4829

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Marc Veasey Congressional Campaign

Mailing Address 6737 Brentwood Stair Rd, Ste 240

City Fort Worth State TX Zip Code 76112

Purpose of Disbursement

011

Category/
Type

Candidate Name

Marc Veasey

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2012

Transaction ID : SB23.4826

Amount of Each Disbursement this Period

2000.00

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

6500.00

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

6500.00

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6230

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6232

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6233

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6234

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6236

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6238

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2012

Transaction ID : **SB29.6239**

Amount of Each Disbursement this Period

27.67

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : **SB29.6240**

Amount of Each Disbursement this Period

32.03

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : **SB29.6241**

Amount of Each Disbursement this Period

264.87

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

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

324.57

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2012

Transaction ID : SB29.6243

Amount of Each Disbursement this Period

50.80

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2012

Transaction ID : SB29.6244

Amount of Each Disbursement this Period

33.43

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Non-contribution account. CC processing fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2012

Transaction ID : SB29.6245

Amount of Each Disbursement this Period

23.15

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

107.38

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. Stephen Bingham

Mailing Address 353 Hibiscus Way

City San Rafael State CA Zip Code 94903

Purpose of Disbursement
Noncontrib acct. Refunded contribution by check.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6648

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Stephen Bingham

Mailing Address 353 Hibiscus Way

City San Rafael State CA Zip Code 94903

Purpose of Disbursement
Noncontrib acct. Refunded contrib earmarked thru ActBlue

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6650

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Helen Cagampang

Mailing Address 1015 Fresno Ave.

City Berkeley State CA Zip Code 94707

Purpose of Disbursement
Noncontrib acct. Refund contrb earmarked thru ActBlue.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6649

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial) A. Fredrikson & Byron, P.A.		Date of Disbursement MM / DD / YYYY 05 / 25 / 2012
Mailing Address PO Box 1484		Transaction ID : SB29.6269
City Minneapolis	State MN	
Zip Code 55480	Purpose of Disbursement Non-contribution account. Legal Fees	Amount of Each Disbursement this Period 691.50
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Fredrikson & Byron, P.A.		Date of Disbursement MM / DD / YYYY 05 / 25 / 2012
Mailing Address PO Box 1484		Transaction ID : SB29.6270
City Minneapolis	State MN	
Zip Code 55480	Purpose of Disbursement Non-contribution account. Legal Fees	Amount of Each Disbursement this Period 788.50
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Integrated Digital Media		Date of Disbursement MM / DD / YYYY 06 / 26 / 2012
Mailing Address 441 California St.		Transaction ID : SB29.6258
City San Francisco	State CA	
Zip Code 94104	Purpose of Disbursement Non-contribution account. Materials for Antioch event	Amount of Each Disbursement this Period 507.04
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1987.04
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. Integrated Digital Media

Mailing Address 441 California St.

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Non-contribution account. Materials for Antioch event

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2012

Transaction ID : SB29.6259

Amount of Each Disbursement this Period

169.26

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Non-contribution account. Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2012

Transaction ID : SB29.6256

Amount of Each Disbursement this Period

238.66

Full Name (Last, First, Middle Initial)

C. Jim Frazier for State Assembly 2012

Mailing Address 2401 Waterman Blvd. #4 PMB 104

City Fairfield State CA Zip Code 94533

Purpose of Disbursement
CA State Assembly

011

Candidate Name

Jim Frazier

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : SB29.4819

Amount of Each Disbursement this Period

1500.00

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

1907.92

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. Mary Ann Perez for State Representative

Mailing Address 7007 Gulf Freeway, Suite 125

City Houston State TX Zip Code 77087

Purpose of Disbursement
Texas State Representative Distrcit 144

011

Candidate Name

Mary Ann Perez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : **SB29.4815**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mary Gonzalez Campaign

Mailing Address P.O. Box 450

City Clint State TX Zip Code 79836

Purpose of Disbursement
Texas State Representative District 75

011

Candidate Name

Mary Gonzalez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : **SB29.4813**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Sid Voorakkara for State Assembly 2012

Mailing Address P.O. Box 15493

City San Diego State CA Zip Code 92175

Purpose of Disbursement
CA State Assembly

011

Candidate Name

Sid Voorakkara

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : **SB29.4817**

Amount of Each Disbursement this Period

2000.00

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

5500.00

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. Spoon & Company

Mailing Address 10307 Rawhide Trl

City Austin State TX Zip Code 78736

Purpose of Disbursement
Non-contribution account. Catering cost for Austin, TX event.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6255

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Spotlight Design & Printing

Mailing Address 725 Bryant St.

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Non-contribution account. Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6266

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Spotlight Design & Printing

Mailing Address 725 Bryant St.

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Non-contribution account. Delivery charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6267

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PACPLUS

Full Name (Last, First, Middle Initial)

A. Texas Organizing Project

Mailing Address P.O. Box 120296

City San Antonio State TX Zip Code 78212

Purpose of Disbursement
Non-contribution account. Grant for voter registration.

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6268

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

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

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)..... ▶

