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Horizon P.A.C.

515 Franklin Square, Michigan City, IN 46360

December 1, 2010

Federal Election Commission
Reports Analysis Division
999 E. Street, N.W.
Washington, DC 20463
Attn: Christopher J. Morse

Re: Horizon PAC
ID: C00135376

Enclosed for filing with the Federal Election Commission is the November 24th Post – Election Report for Horizon Pac. There were no individual contributions in excess of \$200.00 made during the period.

If you have any questions regarding this filing, please contact Cathy Tempel at (219)873-2705.

Sincerely,



Mark E. Secor
Treasurer

MES: cat

Enc.

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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. HORIZON PAC

12FE4M5

ADDRESS (number and street) 515 FRANKLIN SQUARE MICHAEL CITY IN 46360

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C 00135376

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special. Election on 11/02/2010 in the State of IN

5. Covering Period 10/01/2010 through 11/23/2010

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 MARK E. SECOR Signature of Treasurer [Signature] Date 12/01/2010

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 FEC FORM 3X Rev. 12/2004

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HORIZON PAC

Report Covering the Period:

From:

10 01 2010

To:

11 23 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6 (a) Cash on Hand January 1, 2010		201624
(b) Cash on Hand at Beginning of Reporting Period.....	332811	
(c) Total Receipts (from Line 19)	4428	325615
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	337239	527239
7 Total Disbursements (from Line 31)	000	190000
8 Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	337239	337239
9 Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	000	
10 Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	000	

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

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**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

HORIZON PAC

Report Covering the Period: From:

10 01 2010

To:

11 23 2010

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).....
 - (ii) Unitemized
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

4400
4400

25300
25300

- (b) Political Party Committees
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

4400

25300

12. Transfers From Affiliated/Other Party Committees

13. All Loans Received

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

28

315

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3)
- (b) Levin Funds (from Schedule H5)
- (c) Total Transfers (add 18(a) and 18(b))

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))

4428

25615

20. Total Federal Receipts (subtract Line 18(c) from Line 19)

4428

25615

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**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)	4400	25300
34. Total Contribution Refunds (from Line 28(d))	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4400	25300
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	000	000
37. Offsets to Operating Expenditures (from Line 15, page 3)	000	000
38. Net Operating Expenditures (subtract Line 37 from Line 36)	000	000

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

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

NAME OF COMMITTEE (In Full) *HORIZON PAC*

Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		M / D / Y	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		M / D / Y	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		M / D / Y	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	
TOTAL This Period (last page this line number only).....▶	000

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

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

FOR LINE NUMBER:
(check only one)

PAGE / OF /

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

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: _____

Category/Type: _____

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: _____

Category/Type: _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: _____

Category/Type: _____

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

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

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
12/1/10

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

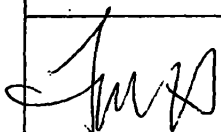
Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


 PREPARER

12/6/10
 DATE PREPARED

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