



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**PAC TO THE FUTURE**

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

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2012"/>  | <input type="text" value="238872.87"/> | <input type="text" value="238872.87"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="257252.02"/> |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="-1500.00"/>  | <input type="text" value="17000.00"/>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="255752.02"/> | <input type="text" value="255872.87"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="11030.00"/>  | <input type="text" value="11150.85"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="244722.02"/> | <input type="text" value="244722.02"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

Write or Type Committee Name  
**PAC TO THE FUTURE**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 0.00                          | 18500.00                          |
| (ii) Unitemized .....   | -1500.00                      | -1500.00                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | -1500.00                      | 17000.00                          |
| (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) .....  | -1500.00                      | 17000.00                          |
| 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.).....   | 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))..... ▶                        | -1500.00                      | 17000.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | -1500.00                      | 17000.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

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| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 6030.00                       | 6150.85                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 6030.00                       | 6150.85                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 5000.00                       | 5000.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 11030.00                      | 11150.85                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 11030.00                      | 11150.85                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | -1500.00                      | 17000.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | -1500.00                      | 17000.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 6030.00                       | 6150.85                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 6030.00                       | 6150.85                           |

**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 9   |
| <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)  
**PAC TO THE FUTURE**

|   |                                      |  |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Robby K Hay</b>  |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>01 / 19 / 2012<br><b>Transaction ID : C3909566</b> |
| Mailing Address 625 10th Avenue   |                                      | Amount of Each Receipt this Period<br>-1500.00   |
| City<br>Kirkland  | State<br>WA                          | Zip Code<br>98033  |
| FEC ID number of contributing federal political committee.<br>C   | Bounced Check                        |  |
| Name of Employer<br>American Income Life Insurance  | Occupation<br>Insurance Agent        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>-1500.00 |  |

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kristin B. LaFond</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>01 / 17 / 2012<br><b>Transaction ID : C3898753</b> |
| Mailing Address 27 Tyler Road   |                                     | Amount of Each Receipt this Period<br>-1500.00   |
| City<br>Lexington   | State<br>MA                         | Zip Code<br>02420  |
| FEC ID number of contributing federal political committee.<br>C   | Bounced Check                       |  |
| Name of Employer<br>American Income Life Insurance  | Occupation<br>Insurance Agent       |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00 |  |

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Kristin B. LaFond</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>01 / 24 / 2012<br><b>Transaction ID : C3898754</b> |
| Mailing Address 27 Tyler Road   |                                     | Amount of Each Receipt this Period<br>1500.00  |
| City<br>Lexington   | State<br>MA                         | Zip Code<br>02420  |
| FEC ID number of contributing federal political committee.<br>C   | Bounced Check                       |  |
| Name of Employer<br>American Income Life Insurance  | Occupation<br>Insurance Agent       |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00 |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | -1500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | -1500.00 |

**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)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Jennifer Crider**

Mailing Address 3634 Gunston Road

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01    |   | 23    |   | 2012      |

**Transaction ID : D307522**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Vanessa Ide**

Mailing Address 1817 Kalorama Road, NW  
Apt. C

City Washington State DC Zip Code 20009

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

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01    |   | 23    |   | 2012      |

**Transaction ID : D307524**

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Stella Ross**

Mailing Address 1637 Marion Street  
#200

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) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01    |   | 23    |   | 2012      |

**Transaction ID : D307523**

Amount of Each Disbursement this Period

|         |
|---------|
| 1500.00 |
|---------|

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

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

|         |
|---------|
| 4500.00 |
|---------|

|  |
|--|
|  |
|--|

# 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)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

### A. Solutions West

Mailing Address 601 Mississippi St

City San Francisco State CA Zip Code 94107-2936

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : D307525

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|

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

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

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 6 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

