

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 4040 W 70TH ST  
 Check if different than previously reported. (ACC)  
MINNEAPOLIS MN 55435

2. **FEC IDENTIFICATION NUMBER** C00034785  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of MN

5. Covering Period 10 14 2010 through 11 22 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 Valerie Hayes

Signature of Treasurer Electronically Filed by Valerie Hayes Date 06 20 2011

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)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 1 | 4 |

|   |   |   |   |
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 To: 

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| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> | X                       | Y                                 | Y | Y | 2 | 0 | 1 | 0 |  | 140824.11 |
| X   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 1                                 | 0 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 101107.68               |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 32092.45                | 223447.47                         |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 133200.13               | 364271.58                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 41794.82                | 272866.27                         |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 91405.31                | 91405.31                          |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |           |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 1 | 4 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 1 |

|   |   |
|---|---|
| D | D |
| 2 | 2 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| 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) .....  | 31005.00                      | 195009.00                         |
| (ii) Unitemized .....  | 1335.00                       | 13656.66                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 32340.00                      | 208665.66                         |
| (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) .....     | 32340.00                      | 208665.66                         |
| 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 .....           | -250.00                       | 14750.00                          |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 2.45                          | 31.81                             |
| 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 Transfer (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)) .....                          | 32092.45                      | 223447.47                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 32092.45                      | 223447.47                         |

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Shared 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.....  | 2294.82                       | 4998.86                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶                        | 2294.82                       | 4998.86                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 35500.00                      | 250500.00                         |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (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                          | 11850.00                          |
| (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                          | 11850.00                          |
| 29. Other Disbursements.....   | 4000.00                       | 5517.41                           |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                               |                                   |
| (a) Shared 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))..       | 41794.82                      | 272866.27                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 41794.82                      | 272866.27                         |

| 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) .....        | 32340.00                      | 208665.66                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 11850.00                          |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 32340.00                      | 196815.66                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 2294.82                       | 4998.86                           |
| 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) .....             | 2294.82                       | 4998.86                           |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 22  
(check only one)

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

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)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

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

Mailing Address 14205 Telegraph Rd

City State Zip Code  
Woodbridge VA 22194

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

Name of Employer UCI Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.4843

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 1029 E Center St

City State Zip Code  
Wasraw IN 46580

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

Name of Employer Helvey & Associates Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

**Transaction ID:** SA11AI.4169

Amount of Each Receipt this Period  
500.00

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

Mailing Address 404 Brock Dr

City State Zip Code  
Bloomington IL 61701

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

Name of Employer AFNI Inc Occupation Director of Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1380.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

**Transaction ID:** SA11AI.4836

Amount of Each Receipt this Period  
750.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Jon Dunn  
 Mailing Address 1331 Citizens Pkwy  
 Ste 110  
 City State Zip Code  
**Morrow GA 30260**  
 Date of Receipt  
 M M / D D / Y Y Y Y  
**1 0 / 2 1 / 2 0 1 0**  
**Transaction ID: SA11AI.4325**  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversified Acct Systems President  
 of GA  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
 Fran Fisher  
 Mailing Address 3541 Chain Bridge Rd  
 Ste 209  
 City State Zip Code  
**Fairfax VA 22030**  
 Date of Receipt  
 M M / D D / Y Y Y Y  
**1 1 / 1 6 / 2 0 1 0**  
**Transaction ID: SA11AI.4841**  
 Amount of Each Receipt this Period  
 500.00  
 Contribution  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Revenue Recovery Consultants Owner  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1830.00

**C.** Full Name (Last, First, Middle Initial)  
 Jay Gonsalves  
 Mailing Address 16 Commerce Blvd  
 Ste 4  
 City State Zip Code  
**Middlebrook MA 02346**  
 Date of Receipt  
 M M / D D / Y Y Y Y  
**1 0 / 2 1 / 2 0 1 0**  
**Transaction ID: SA11AI.4368**  
 Amount of Each Receipt this Period  
 1330.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Action Collection Agencies President  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1455.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2330.00  
**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 8 / 22  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

**A.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Bradley Klein  |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 22 / 2010 |
| Mailing Address 15650 N Black Canyon Hwy<br>Ste B140  |                                    | <b>Transaction ID:</b> SA11AI.4424                  |
| City<br>Phoenix   | State<br>AZ                        | Zip Code<br>85053                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer Paid in Full   | Occupation<br>President            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |   |

**B.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Pauline Kussart  |                                     | Date of Receipt<br>MM / DD / YYYY<br>10 / 21 / 2010 |
| Mailing Address 6425 Odana Rd   |                                     | <b>Transaction ID:</b> SA11AI.4439                  |
| City<br>Madison   | State<br>WI                         | Zip Code<br>53719                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>375.00        |
| Name of Employer<br>H. E. Stark Agency  | Occupation<br>President             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1125.00 |   |

**C.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Pauline Kussart  |                                     | Date of Receipt<br>MM / DD / YYYY<br>11 / 17 / 2010 |
| Mailing Address 6425 Odana Rd   |                                     | <b>Transaction ID:</b> SA11AI.4441                  |
| City<br>Madison   | State<br>WI                         | Zip Code<br>53719                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>375.00        |
| Name of Employer<br>H. E. Stark Agency  | Occupation<br>President             |   |
| 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) .....           | ▶ | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 22  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Leydens

Mailing Address 711 W McCarty St

City State Zip Code  
Jefferson City MO 65105

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

Name of Employer Occupation  
Berlin-Wheeler Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

**Transaction ID:** SA11AI.4456

Amount of Each Receipt this Period  
1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Eric Mock

Mailing Address 1460 Renaissance Dr Ste 400

City State Zip Code  
Park Ridge IL 60068

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

Name of Employer Occupation  
Medical Business Bureau LLC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.4472

Amount of Each Receipt this Period  
3000.00

**C.**

Full Name (Last, First, Middle Initial)  
Porter Morgan

Mailing Address The Oil Center 2601 NW Expy

City State Zip Code  
Oklahoma City OK 73112

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

Name of Employer Occupation  
CAP Financial Corp President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11AI.4474

Amount of Each Receipt this Period  
4550.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9050.00**

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

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 / 22 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Mark Neeb   | Date of Receipt<br>MM / DD / YYYY<br>11 / 16 / 2010 |
|           | Mailing Address 3055 41st St NW<br>Ste 100   | <b>Transaction ID:</b> SA11AI.4490                  |
|           | City State Zip Code<br>Rochester MN 55901  | Amount of Each Receipt this Period<br>1000.00       |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   |   |
|           | Name of Employer The Affiliated Group      Occupation President<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General      Aggregate Year-to-Date ▼<br><input type="checkbox"/> Other (specify) ▼      3250.00 |   |

|           |  |   |
|-----------|--|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Jim Richards  | Date of Receipt<br>MM / DD / YYYY<br>10 / 15 / 2010 |
|           | Mailing Address 2250 Satellite Blvd<br>Ste 210   | <b>Transaction ID:</b> SA11AI.4515                  |
|           | City State Zip Code<br>Duluth GA 30097   | Amount of Each Receipt this Period<br>1250.00       |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   |   |
|           | Name of Employer Capio Partners LLC      Occupation CEO & President<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General      Aggregate Year-to-Date ▼<br><input type="checkbox"/> Other (specify) ▼      2500.00 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Jim Richards  | Date of Receipt<br>MM / DD / YYYY<br>11 / 16 / 2010 |
|           | Mailing Address 2250 Satellite Blvd<br>Ste 210   | <b>Transaction ID:</b> SA11AI.4517                  |
|           | City State Zip Code<br>Duluth GA 30097   | Amount of Each Receipt this Period<br>1250.00       |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   |   |
|           | Name of Employer Capio Partners LLC      Occupation CEO & President<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General      Aggregate Year-to-Date ▼<br><input type="checkbox"/> Other (specify) ▼      3750.00 |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

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

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

FOR LINE NUMBER: PAGE 11 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

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

Mailing Address 10625 Techwood Cir

City State Zip Code  
Cincinnati OH 45242

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

Name of Employer Occupation  
Unifund CCR Partners President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2010

**Transaction ID:** SA11AI.4530

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 29 E Madison St  
Ste 1650

City State Zip Code  
Chicago IL 60602

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

Name of Employer Occupation  
Bonded Collections Corp Senior VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2010

**Transaction ID:** SA11AI.4540

Amount of Each Receipt this Period  
100.00

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

Mailing Address 11811 North Fwy

City State Zip Code  
Houston TX 77060

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

Name of Employer Occupation  
FMA Alliance President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 02 / 2010

**Transaction ID:** SA11AI.4576

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7600.00**

**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 / 22 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

|   |   |                                     |  |
|---|---|-------------------------------------|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Jeff Speigelhauer        |                                     | Date of Receipt  |
|   | Mailing Address 11811 North Fwy                                     |                                     | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y<br>11 / 02 / 2010 |
|   | City  | State                               | Zip Code   |
|   | Houston   | TX                                  | 77060  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                     | <b>Transaction ID:</b> SA11AI.5311   |
| Name of Employer<br>FMA Alliance  |   | Occupation<br>President             | Amount of Each Receipt this Period<br>-2500.00   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>2500.00 | Contribution refund  |

|   |   |                                    |  |
|---|---|------------------------------------|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Everett Stagg            |                                    | Date of Receipt  |
|   | Mailing Address 214 Expo Cir Ste 7                                  |                                    | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y<br>10 / 21 / 2010 |
|   | City  | State                              | Zip Code   |
|   | West Monroe   | LA                                 | 71292  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                    | <b>Transaction ID:</b> SA11AI.4574   |
| Name of Employer<br>Coast Professional, Inc.  |   | Occupation<br>President            | Amount of Each Receipt this Period<br>225.00   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>225.00 |  |

|   |   |                                     |  |
|---|---|-------------------------------------|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Sandy Stockton           |                                     | Date of Receipt  |
|   | Mailing Address 4200 International Pkwy                             |                                     | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y<br>11 / 21 / 2010 |
|   | City  | State                               | Zip Code   |
|   | Carrollton  | TX                                  | 75007  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                     | <b>Transaction ID:</b> SA11AI.5555   |
| Name of Employer<br>None  |   | Occupation<br>Homemaker             | Amount of Each Receipt this Period<br>2400.00  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>4700.00 | Contribution   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>125.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

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

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NAME OF COMMITTEE (In Full)  
AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Harry Strausser

Mailing Address 9 Hillcrest Dr

City State Zip Code  
Elysburg PA 17824

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

Name of Employer Occupation  
Action Management Inc President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 820.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.5598

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Brian Watkins

Mailing Address 5503 Cherokee Ave  
Ste 100

City State Zip Code  
Alexandria VA 22312

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

Name of Employer Occupation  
National Credit Corp Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.4636

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Niel Welborn

Mailing Address 560 S Herlong Ave

City State Zip Code  
Rock Hill SC 29732

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

Name of Employer Occupation  
Todd Bremer & Lawson VP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

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

Transaction ID: SA11AI.4638

Amount of Each Receipt this Period

400.00

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

900.00

**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 14 / 22                |                             |
|   | (check only one)             |                              |                             |                             |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

|   |   |                          |   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|--------------------------|---|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Christopher Wunder |                          | Date of Receipt   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | Mailing Address 1920 Greenspring Dr<br>Ste 200                |                          | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> |                                    | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 2 |  | 2 | 0 | 1 | 0 |
|   | M   | M                        | /   | D                                  | D | / | Y | Y | Y | Y |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | 1   | 0                        |   | 2                                  | 2 |   | 2 | 0 | 1 | 0 |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | City  | State                    | Zip Code  | <b>Transaction ID:</b> SA11AI.4820 |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | Timonium  | MD                       | 21093   | Amount of Each Receipt this Period |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| FEC ID number of contributing federal political committee.  |   | <b>C</b>                 | 4750.00   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Name of Employer<br>Receivables Outsourcing Inc   |   | Occupation<br>President  | Contribution  |                                    |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼ | 5000.00   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>4750.00</b>  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>31005.00</b> |

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

|   |  |                              |
|---|--|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:                       | PAGE 15 / 22                 |
|   | (check only one)                       |                              |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b           | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14            | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12   | <input checked="" type="checkbox"/> 16 | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

**A.**

|   |                          |   |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Denise Cross   |                          | Date of Receipt<br>MM / DD / YYYY<br>10 / 21 / 2010 |
| Mailing Address 1000 Alderman Dr  |                          | <b>Transaction ID:</b> SA16.5569                    |
| City<br><b>Alpharetta</b>   | State<br><b>GA</b>       | Zip Code<br><b>30005</b>                            |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                          | Amount of Each Receipt this Period<br>-125.00       |
| Name of Employer  | Occupation               | Contribution refund                                 |
| Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ |   |

**B.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Joseph Grandizio   |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 21 / 2010 |
| Mailing Address 1000 Alderman Dr  |   | <b>Transaction ID:</b> SA16.5568                    |
| City<br><b>Alpharetta</b>   | State<br><b>GA</b>                            | Zip Code<br><b>30005</b>                            |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br>-125.00       |
| Name of Employer<br>LexisNexis  | Occupation<br><b>National Account Manager</b> | Contribution refund                                 |
| Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>125.00            |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>-250.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>-250.00</b> |

**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 16 / 22

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 981540

City State Zip Code  
El Paso TX 79998

Purpose of Disbursement  
Credit Card Fees

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4193  
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

596.95

B.

Full Name (Last, First, Middle Initial)  
Merchant Solutions

Mailing Address 920 N Argonne Rd  
Ste 200

City State Zip Code  
Spokane Valley WA 99212

Purpose of Disbursement  
Credit Card Fees

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4191  
Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

1697.87

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

2294.82

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

2294.82

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input 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)  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>ADRIAN SMITH FOR CONGRESS</p> <p>Mailing Address 3321 Avenue I<br/>Suite 6</p> <p>City State Zip Code<br/>Scottsbluff NE 69361</p> <p>Purpose of Disbursement<br/>Campaign Contribution</p> <p>Candidate Name<br/>ADRIAN SMITH</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: NE District: 03</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                     | <p><b>Transaction ID:</b> SB23.4241</p> <p>Date of Disbursement<br/>10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> <p>011<br/>Category/<br/>Type</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>BERG FOR CONGRESS</p> <p>Mailing Address PO BOX 9394</p> <p>City State Zip Code<br/>FARGO ND 58106</p> <p>Purpose of Disbursement<br/>Campaign Contribution</p> <p>Candidate Name<br/>RICHARD A BERG</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: ND District: 00</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>   | <p><b>Transaction ID:</b> SB23.4217</p> <p>Date of Disbursement<br/>10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period<br/>2000.00</p> <p>011<br/>Category/<br/>Type</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>BOBBY SCHILLING FOR CONGRESS</p> <p>Mailing Address 367 Avenue of The Cities Suite D</p> <p>City State Zip Code<br/>East Moline IL 61244</p> <p>Purpose of Disbursement<br/>Campaign Contribution</p> <p>Candidate Name<br/>ROBERT T MR. SCHILLING</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: IL District: 17</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.4221</p> <p>Date of Disbursement<br/>10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period<br/>2500.00</p> <p>011<br/>Category/<br/>Type</p> |

**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 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)  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

|  |  |
|--|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>DAN COATS FOR INDIANA<br>Mailing Address PO BOX 301141<br>City INDIANAPOLIS State IN Zip Code 46230<br>Purpose of Disbursement Campaign Contribution<br>Candidate Name DANIEL R COATS<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: IN District: 00<br>Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | Transaction ID: SB23.4239<br>Date of Disbursement<br>10 / 19 / 2010  |
|  | Amount of Each Disbursement this Period<br>2000.00   |
|  | Category/<br>Type<br>011   |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>DEMMER FOR CONGRESS<br>Mailing Address 502 2ND ST NE<br>PO BOX 6<br>City HAYFIELD State MN Zip Code 55940<br>Purpose of Disbursement Campaign Contribution<br>Candidate Name RANDY LEE DEMMER<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MN District: 01<br>Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.4215<br>Date of Disbursement<br>10 / 19 / 2010  |
|  | Amount of Each Disbursement this Period<br>2000.00   |
|  | Category/<br>Type<br>011   |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>DUFFY FOR CONGRESS<br>Mailing Address PO Box 186<br>City Ashland State WI Zip Code 54806<br>Purpose of Disbursement Campaign Contribution<br>Candidate Name SEAN DUFFY<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: WI District: 07<br>Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                        | Transaction ID: SB23.4233<br>Date of Disbursement<br>10 / 19 / 2010  |
|  | Amount of Each Disbursement this Period<br>5000.00   |
|  | Category/<br>Type<br>011   |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

9000.00

**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)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>KIRK FOR SENATE</p> <p>Mailing Address P.O. Box 8</p> <p>City Winnetka State IL Zip Code 60093</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name MARK STEVEN KIRK</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: IL District: 00</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.4235<br/><b>Date of Disbursement</b><br/>10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> <p>011<br/>Category/<br/>Type</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>REPUBLICAN PARTY OF WISCONSIN</p> <p>Mailing Address 148 E. Johnson Street</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Party Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                  | <p><b>Transaction ID:</b> SB23.4223<br/><b>Date of Disbursement</b><br/>10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period<br/>5000.00</p> <p>011<br/>Category/<br/>Type</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>RIBBLE FOR CONGRESS</p> <p>Mailing Address PO BOX 7200</p> <p>City APPLETON State WI Zip Code 54912</p> <p>Purpose of Disbursement Campaign Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: WI District: 08</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>             | <p><b>Transaction ID:</b> SB23.4227<br/><b>Date of Disbursement</b><br/>10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period<br/>2000.00</p> <p>011<br/>Category/<br/>Type</p> |

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

8000.00

**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)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

|    |   |  |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial)<br>ROKITA, THEODORE EDWARD  | Transaction ID: SB23.5313<br>Date of Disbursement<br>10 / 20 / 2010  |
|    | Mailing Address 7643 EAST U.S. 36   | Amount of Each Disbursement this Period<br>1000.00   |
|    | City AVON State IN Zip Code 46123   |  |
|    | Purpose of Disbursement Contribution<br>Candidate Name  | 011<br>Category/<br>Type   |
|    | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: IN District: 04 | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| B. | Full Name (Last, First, Middle Initial)<br>SCOTT FOR CONGRESS   | Transaction ID: SB23.4219<br>Date of Disbursement<br>10 / 14 / 2010  |
|    | Mailing Address 553 OLD CHATTANOOGA VALLEY RD   | Amount of Each Disbursement this Period<br>1000.00   |
|    | City FLINTSTONE State GA Zip Code 30725   |  |
|    | Purpose of Disbursement Campaign Contribution<br>Candidate Name Austin Scott  | 011<br>Category/<br>Type   |
|    | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District:                  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

2000.00

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

35500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)  
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Cooper, Roy for Attorney General

Transaction ID: SB29.5325

Date of Disbursement

Mailing Address P. O. Box 10587

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 1 | 0 |

City Raleigh State NC Zip Code 27605

Amount of Each Disbursement this Period

|         |
|---------|
| 4000.00 |
|---------|

Purpose of Disbursement  
Contribution

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name  
Roy Cooper

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

|         |
|---------|
| 4000.00 |
|---------|

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

|         |
|---------|
| 4000.00 |
|---------|