

**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

LCR PAC

ADDRESS (number and street)

1050 Connecticut Ave NW

Suite 400

☐Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00405506

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

1 1

0 3

2 0 0 9

in the
State of

NY

(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

0 7

0 1

2 0 0 9

through

1 0

1 4

2 0 0 9

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

Craig Max

Signature of Treasurer

Electronically Filed by Craig Max

Date

1 2

0 3

2 0 0 9

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

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
LCR PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div><div>Y</div><div>Y</div><div>Y</div><div>2009</div></div>		<div>520.83</div>
(b) Cash on Hand at Beginning of Reporting Period	<div>779.42</div>	
(c) Total Receipts (from Line 19)	<div>4850.00</div>	<div>5576.06</div>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<div>5629.42</div>	<div>6096.89</div>
7. Total Disbursements (from Line 31)	<div>3315.69</div>	<div>3783.16</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>2313.73</div>	<div>2313.73</div>
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	

☐ 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)

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Write or Type Committee Name

LCR PAC

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 0 9

To:

M M
1 0D D
1 4Y Y Y Y
2 0 0 9

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)	4750.00	5250.00
(ii) Unitemized	100.00	316.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4850.00	5566.06
(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)	4850.00	5566.06
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	10.00
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 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))	4850.00	5576.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4850.00	5576.06

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B 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.....	315.69	783.16	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	315.69	783.16	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	3000.00	
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	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) 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))..	3315.69	3783.16	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3315.69	3783.16	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	4850.00	5566.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4850.00	5566.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	315.69	783.16
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	10.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	315.69	773.16

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

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

FOR LINE NUMBER: PAGE 6 / 11

(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)

LCR PAC

A.

Full Name (Last, First, Middle Initial)

Scott Ables

Mailing Address 1210 N Kings Rd
Suite 103

City State Zip Code
West Hollywood CA 90069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventura Group

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.4642

Amount of Each Receipt this Period

1000.00

contribution

B.

Full Name (Last, First, Middle Initial)

Scott Ables

Mailing Address 1210 N Kings Rd
Suite 103

City State Zip Code
West Hollywood CA 90069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventura Group

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.4644

Amount of Each Receipt this Period

1000.00

contribution

C.

Full Name (Last, First, Middle Initial)

Stephen Gale

Mailing Address 1548 Palos Verdes Dr. W

City State Zip Code
Palos Verdes Est. CA 90274

FEC ID number of contributing
federal political committee.

C

Name of Employer
Edison International

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.4627

Amount of Each Receipt this Period

250.00

contribution

SUBTOTAL of Receipts This Page (optional)

2250.00

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 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LCR PAC

A.

Full Name (Last, First, Middle Initial)

Craig Max

Mailing Address 1522 10th Street NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.4625

Amount of Each Receipt this Period

500.00

contribution

B.

Full Name (Last, First, Middle Initial)

Craig Max

Mailing Address 1522 10th Street NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.4626

Amount of Each Receipt this Period

500.00

contribution

C.

Full Name (Last, First, Middle Initial)

Len Olds

Mailing Address 2284 Temple Hills Dr

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.4639

Amount of Each Receipt this Period

500.00

contribution

SUBTOTAL of Receipts This Page (optional)

1500.00

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 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LCR PAC

A.

Full Name (Last, First, Middle Initial)

Len Olds

Mailing Address 2284 Temple Hills Dr

City

Laguna Beach

State

CA

Zip Code

92651

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.4641

Amount of Each Receipt this Period

1000.00

contribution

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4750.00

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)

PAGE 9 / 11

<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)
LCR PAC

A. Full Name (Last, First, Middle Initial) Global Pay	Transaction ID: SB21B.4628 Date of Disbursement																				
Mailing Address 10705 Red Run Blvd	<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>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	9												
City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank fee	<table border="1"> <tr> <td>65.00</td> </tr> </table>	65.00																			
65.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Global Pay	Transaction ID: SB21B.4629 Date of Disbursement																				
Mailing Address 10705 Red Run Blvd	<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>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank fee	<table border="1"> <tr> <td>65.00</td> </tr> </table>	65.00																			
65.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Global Pay	Transaction ID: SB21B.4630 Date of Disbursement																				
Mailing Address 10705 Red Run Blvd	<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>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	9												
City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>65.00</td> </tr> </table>	65.00																			
65.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

195.00

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)

PAGE 10 / 11

<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)
LCR PAC

A.

Full Name (Last, First, Middle Initial)

Global Pay

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
bank fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4631

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2009

Amount of Each Disbursement this Period

115.74

SUBTOTAL of Disbursements This Page (optional)

115.74

TOTAL This Period (last page this line number only)

310.74

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 11

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
LCR PAC

A.

Full Name (Last, First, Middle Initial)
DEDE FOR CONGRESS INC

Mailing Address 63 GLEASON STREET

City State Zip Code
GOUVERNEUR NY 13642

Purpose of Disbursement
contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 23

Disbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

Transaction ID: SB23.4635

Date of Disbursement

M M / D D / Y Y Y Y
09 / 25 / 2009

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
MARY BONO MACK COMMITTEE

Mailing Address PO Box 3370

City State Zip Code
Palm Springs CA 92263

Purpose of Disbursement
contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 45

Disbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

Transaction ID: SB23.4637

Date of Disbursement

M M / D D / Y Y Y Y
09 / 29 / 2009

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00