

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. Cain Connections PAC

ADDRESS (number and street) PO Box 25254 Alexandria VA 22313-5254

2. FEC IDENTIFICATION NUMBER C00507707 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (X), Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 / 01 / 2013 through 06 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mark Block

Signature of Treasurer Mark Block [Electronically Filed] Date 07 / 23 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Cain Connections PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		36963.11
(b) Cash on Hand at Beginning of Reporting Period.....	36963.11	
(c) Total Receipts (from Line 19)	52587.81	52587.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	89550.92	89550.92
7. Total Disbursements (from Line 31).....	79594.39	79594.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	9956.53	9956.53
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	14660.36	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Cain Connections PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	300	300
(ii) Unitemized	278.75	278.75
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	578.75	578.75
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	578.75	578.75
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	15.9	15.9
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	51993.16	51993.16
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	52587.81	52587.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	52587.81	52587.81

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	69594.39	69594.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	69594.39	69594.39
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	10000	10000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	79594.39	79594.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79594.39	79594.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	578.75	578.75
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	578.75	578.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	69594.39	69594.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	15.9	15.9
38. Net Operating Expenditures (subtract Line 37 from Line 36)	69578.49	69578.49

**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 20
<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)
Cain Connections PAC

Full Name (Last, First, Middle Initial) A. Michael P Rogers		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 965-24000-c
Mailing Address 76 Dow Road		Amount of Each Receipt this Period 50
City Hollis	State NH	Zip Code 03049-6504
FEC ID number of contributing federal political committee. C		
Name of Employer Aruba Networks	Occupation Tech. Dir. Customer Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300	

Full Name (Last, First, Middle Initial) B. Michael P Rogers		Date of Receipt MM / DD / YYYY 02 / 27 / 2013 Transaction ID : 965-24016-c
Mailing Address 76 Dow Road		Amount of Each Receipt this Period 50
City Hollis	State NH	Zip Code 03049-6504
FEC ID number of contributing federal political committee. C		
Name of Employer Aruba Networks	Occupation Tech. Dir. Customer Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300	

Full Name (Last, First, Middle Initial) C. Michael P Rogers		Date of Receipt MM / DD / YYYY 03 / 30 / 2013 Transaction ID : 965-24028-c
Mailing Address 76 Dow Road		Amount of Each Receipt this Period 50
City Hollis	State NH	Zip Code 03049-6504
FEC ID number of contributing federal political committee. C		
Name of Employer Aruba Networks	Occupation Tech. Dir. Customer Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 7 OF 20
<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)
Cain Connections PAC

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

Mailing Address 76 Dow Road

City Hollis State NH Zip Code 03049-6504

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

Name of Employer Aruba Networks Occupation Tech. Dir. Customer Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt **04 / 29 / 2013**

Transaction ID : 965-24036-c

Amount of Each Receipt this Period **50**

Full Name (Last, First, Middle Initial)
B. Michael P Rogers

Mailing Address 76 Dow Road

City Hollis State NH Zip Code 03049-6504

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

Name of Employer Aruba Networks Occupation Tech. Dir. Customer Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt **05 / 31 / 2013**

Transaction ID : 965-24052-c

Amount of Each Receipt this Period **50**

Contribution

Full Name (Last, First, Middle Initial)
C. Michael P Rogers

Mailing Address 76 Dow Road

City Hollis State NH Zip Code 03049-6504

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

Name of Employer Aruba Networks Occupation Tech. Dir. Customer Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt **06 / 27 / 2013**

Transaction ID : 965-24059-c

Amount of Each Receipt this Period **50**

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cain Connections PAC

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Receipt
Mailing Address 1420 Spring Hill Road Suite 490		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 2391-23978-m
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="6995.13"/>
		List Rental

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Receipt
Mailing Address 1420 Spring Hill Road Suite 490		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 2391-23994-m
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="14763.37"/>
		List Rental

Full Name (Last, First, Middle Initial) C. Omega List Company		Date of Receipt
Mailing Address 1420 Spring Hill Road Suite 490		<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 2391-23999-m
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5264.37"/>
		List Rental

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="27022.87"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cain Connections PAC

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Receipt
Mailing Address 1420 Spring Hill Road Suite 490		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 2391-24014-m
Name of Employer		Amount of Each Receipt this Period <input type="text" value="5547.19"/>
Occupation		List Rental
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="49730.66"/>	

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Receipt
Mailing Address 1420 Spring Hill Road Suite 490		<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 2391-24026-m
Name of Employer		Amount of Each Receipt this Period <input type="text" value="3256.46"/>
Occupation		List Rental
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="49730.66"/>	

Full Name (Last, First, Middle Initial) C. Omega List Company		Date of Receipt
Mailing Address 1420 Spring Hill Road Suite 490		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 2391-24035-m
Name of Employer		Amount of Each Receipt this Period <input type="text" value="7337.62"/>
Occupation		List Rental
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="49730.66"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="16141.27"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cain Connections PAC

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Receipt MM / DD / YYYY 06 / 06 / 2013 Transaction ID : 2391-24055-m
Mailing Address 1420 Spring Hill Road Suite 490		Amount of Each Receipt this Period 6566.52
City McLean	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 49730.66	
		List Rental

Full Name (Last, First, Middle Initial) B. TMA Direct, Inc.		Date of Receipt MM / DD / YYYY 01 / 08 / 2013 Transaction ID : 17899-23984-m
Mailing Address 12120 Sunset Hills Road Suite 450		Amount of Each Receipt this Period 1675
City Reston	State VA	Zip Code 20190-5858
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2262.5	
		List Rental

Full Name (Last, First, Middle Initial) C. TMA Direct, Inc.		Date of Receipt MM / DD / YYYY 03 / 08 / 2013 Transaction ID : 17899-24015-m
Mailing Address 12120 Sunset Hills Road Suite 450		Amount of Each Receipt this Period 587.5
City Reston	State VA	Zip Code 20190-5858
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2262.5	
		List Rental

SUBTOTAL of Receipts This Page (optional).....▶	8829.02
TOTAL This Period (last page this line number only).....▶	51993.16

**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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

01 / 08 / 2013

Transaction ID : SB21B-3-23992-e

Amount of Each Disbursement this Period

10

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

01 / 08 / 2013

Transaction ID : SB21B-3-23993-e

Amount of Each Disbursement this Period

10

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

02 / 07 / 2013

Transaction ID : SB21B-3-24003-e

Amount of Each Disbursement this Period

10

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

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

30.00

**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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 07 / 2013

Transaction ID : SB21B-3-24004-e

Amount of Each Disbursement this Period

10

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2013

Transaction ID : SB21B-3-24012-e

Amount of Each Disbursement this Period

10

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2013

Transaction ID : SB21B-3-24013-e

Amount of Each Disbursement this Period

10

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

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

30.00

**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

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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-3-24030-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-3-24031-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-3-24038-e

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	3

Transaction ID : SB21B-3-24039-e

Amount of Each Disbursement this Period

1	0
---	---

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	3

Transaction ID : SB21B-3-24040-e

Amount of Each Disbursement this Period

1	0
---	---

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 600 N Washington Street

City Alexandria State VA Zip Code 22314-1914

Purpose of Disbursement
PAC Bank Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	3

Transaction ID : SB21B-3-24050-e

Amount of Each Disbursement this Period

1	0
---	---

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

3	0	0
---	---	---

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

3	0	0
---	---	---

**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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2013

Mailing Address 600 N Washington Street

Transaction ID : SB21B-3-24051-e

City Alexandria State VA Zip Code 22314-1914

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Bank Fee

001
Category/ Type

10

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Bank of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2013

Mailing Address 600 N Washington Street

Transaction ID : SB21B-3-24049-e

City Alexandria State VA Zip Code 22314-1914

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Bank Fee

001
Category/ Type

25

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Bank of America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Mailing Address 600 N Washington Street

Transaction ID : SB21B-3-24058-e

City Alexandria State VA Zip Code 22314-1914

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Bank Fee

001
Category/ Type

29.95

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

64.95

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

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

FOR LINE NUMBER:
(check only one)

<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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Koch & Hoos, LLC

Mailing Address 901 N Washington Street
Suite 102

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-1142-23983-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Koch & Hoos, LLC

Mailing Address 901 N Washington Street
Suite 102

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-1142-24010-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Koch & Hoos, LLC

Mailing Address 901 N Washington Street
Suite 102

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-1142-24024-e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Koch & Hoos, LLC

Mailing Address 901 N Washington Street
Suite 102

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement
PAC Accounting/Compliance Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B-1142-24054-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Montgomery Taylor, CPA

Mailing Address 2880 Cleveland Avenue
Suite 2

City Santa Rosa State CA Zip Code 95403-2725

Purpose of Disbursement
PAC Tax Return Preparation

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B-25001-24023-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Patton Boggs LLP

Mailing Address 2550 M Street NW

City Washington State DC Zip Code 20037-1309

Purpose of Disbursement
PAC Legal Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B-2189-24029-e**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. US Treasury

Mailing Address Internal Revenue Service Center

City Ogdden State UT Zip Code 84201-0001

Purpose of Disbursement
2012 Form 1120-POL Income Tax

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-24998-24011-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Cain Connections PAC

Full Name (Last, First, Middle Initial)

A. Cain Solutions Inc.

Mailing Address 825 Fairways Court
Suite 300

City Stockbridge State GA Zip Code 30281-7284

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

012
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 10 / 2013

Transaction ID : SB29-1144-24048-e

Amount of Each Disbursement this Period

10000

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)..... ▶

10000.00

10000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Cain Connections PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International Inc.	Nature of Debt (Purpose): Administrative/Salary/Overhead: PAC Software
Mailing Address 205 Pennsylvania Avenue SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="6000"/>	Transaction ID : SD10-DEBT23618	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="6000"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos, LLC	Nature of Debt (Purpose): Administrative/Salary/Overhead: PAC Accounting/Compliance Services
Mailing Address 901 N Washington Street Suite 102	
City State Zip Code Alexandria VA 22314-1535	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	Transaction ID : SD10-DEBT24061	
Amount Incurred This Period <input type="text" value="1152"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="1152"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Precision Strategies Group, LLC	Nature of Debt (Purpose): Administrative/Salary/Overhead: PAC Online Marketing Services
Mailing Address 316 California Avenue # 40	
City State Zip Code Reno NV 89509-1650	

Outstanding Balance Beginning This Period <input type="text" value="7508.36"/>	Transaction ID : SD10-DEBT23622	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="7508.36"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="14660.36"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="14660.36"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="14660.36"/>