

**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

Solidarity PAC

ADDRESS (number and street)

607 14th Street, NW, Suite 800

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00360388

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

in the
State of

5. Covering Period

03

01

2010

through

03

31

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

Don Solem

Signature of Treasurer

Electronically Filed by Don Solem

Date

04

20

2010

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 18

Write or Type Committee Name
Solidarity PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

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

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 | 2010 | 170229.55 |
| (b) Cash on Hand at Beginning of Reporting Period | 134132.63 | |
| (c) Total Receipts (from Line 19) | 5000.00 | 12500.00 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 139132.63 | 182729.55 |
| 7. Total Disbursements (from Line 31) | 46017.40 | 89614.32 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 93115.23 | 93115.23 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on 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

FEC Form 3X (Rev. 06/2004)

3 / 18

Write or Type Committee Name

Solidarity PAC

Report Covering the Period:

From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

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

To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

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

| 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) | 5000.00 | 5000.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 5000.00 | 5000.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 5000.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 5000.00 | 10000.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 2500.00 |
| 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)) | 5000.00 | 12500.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 5000.00 | 12500.00 |

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..... | 4517.40 | 18262.72 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤ | 4517.40 | 18262.72 | |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 41500.00 | 61351.60 | |
| 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 | 10000.00 | |
| 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)).. | 46017.40 | 89614.32 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 46017.40 | 89614.32 | |

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) | 5000.00 | 10000.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5000.00 | 10000.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 4517.40 | 18262.72 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 4517.40 | 18262.72 |

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

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

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

Solidarity PAC

A.

Full Name (Last, First, Middle Initial)

Joyce L. Stupski

Mailing Address 2 Belvedere Place
Suite 110

City State Zip Code
Mill Valley CA 94941

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: C1168

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Lawrence J. Stupski

Mailing Address 2 Belvedere Place
Suite 340

City State Zip Code
Mill Valley CA 94941

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: C1167

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 / 18

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Solidarity PAC

A.

Full Name (Last, First, Middle Initial)
Kieloch Consulting, Inc.Mailing Address 501 Capitol Court, NE
Suite 100

City Washington State DC Zip Code 20002

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D978

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

2250.00

B.

Full Name (Last, First, Middle Initial)
Perkins Coie LLPMailing Address 607 14th Street, NW
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D953

Date of Disbursement

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

Amount of Each Disbursement this Period

840.25

C.

Full Name (Last, First, Middle Initial)
Bank Of America

Mailing Address PO Box 17309

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D947

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 7 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

957.75

SUBTOTAL of Disbursements This Page (optional)

4048.00

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 8 / 18

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Solidarity PAC

| | |
|---|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 4000 E. Sky Harbor Boulevard</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D950</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="259.70"/></p> <p>[MEMO ITEM]</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address P.O. Box 20706</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D949</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="509.40"/></p> <p>[MEMO ITEM]</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D951</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="469.40"/></p> |

SUBTOTAL of Disbursements This Page (optional)

469.40

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 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)

Solidarity PAC

A.

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address P.O. Box 20706

City
Atlanta

State
GA

Zip Code
30320

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D952

Date of Disbursement

/ /

Amount of Each Disbursement this Period

469.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

4517.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 18

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Solidarity PAC

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| A. Full Name (Last, First, Middle Initial) Boswell for Congress Mailing Address PO Box 6220 | Transaction ID: D954 Date of Disbursement <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | |
| City Des Moines State IA Zip Code 50309 Purpose of Disbursement Contribution Candidate Name Leonard L Boswell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 03 | Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Kirkpatrick for Arizona Mailing Address PO Box 993 City Prescott State AZ Zip Code 86302 Purpose of Disbursement Contribution Candidate Name Ann Kirkpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District: 01 | Transaction ID: D973 Date of Disbursement <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>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | 1500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | |
| 1500.00 | | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Boccieri For Congress Mailing Address 337 Third Street, NW City Canton State OH Zip Code 44702 Purpose of Disbursement Contribution Candidate Name John A Boccieri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 16 | Transaction ID: D966 Date of Disbursement <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>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3500.00

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

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NAME OF COMMITTEE (In Full)
Solidarity PAC

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Markey For Congress | Transaction ID: D968 Date of Disbursement |
| Mailing Address P.O. Box 1333 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 1 0</div> </div> |
| City State Zip Code Fort Collins CO 80521 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name Betsy Markey Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 04 | <div> <div></div> <div>1000.00</div> </div> |
| B. Full Name (Last, First, Middle Initial) Mark Critz for Congress Committee | Transaction ID: D977 Date of Disbursement |
| Mailing Address 551 Main Street Suite 120 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 1 0</div> </div> |
| City State Zip Code Johnstown PA 15901 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name Mark Critz Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: PA District: 12 O2010 Special Genera | <div> <div></div> <div>2500.00</div> </div> |
| C. Full Name (Last, First, Middle Initial) Kilroy for Congress | Transaction ID: D976 Date of Disbursement |
| Mailing Address PO Box 2582 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 1 0</div> </div> |
| City State Zip Code Columbus OH 43216 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name Mary Jo Kilroy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 15 | <div> <div></div> <div>1500.00</div> </div> |

SUBTOTAL of Disbursements This Page (optional)

5000.00

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 PageFOR 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)
Solidarity PAC

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Driehaus For Congress | Transaction ID: D956 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 650 Fox Trails Way | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Cincinnati State OH Zip Code 45233 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Steven L. Driehaus | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Joe Donnelly for Congress | Transaction ID: D979 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 1961 | <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>3</td><td></td><td>2</td><td>6</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 | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City South Bend State IN Zip Code 46634 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1500.00</td> </tr> </table> | 1500.00 | | | | | | | | | | | | | | | | | | | |
| 1500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Joseph S Donnelly | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Halvorson For Congress | Transaction ID: D972 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 176 | <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>3</td><td></td><td>2</td><td>6</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 | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Crete State IL Zip Code 60417 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Deborah Halvorson | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3500.00

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

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NAME OF COMMITTEE (In Full)
Solidarity PAC

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) New House PAC</p> <p>Mailing Address 607 14th Street, NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement 2010 Contribution</p> <p>Candidate Name New House PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D941 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>5000.00</div> </p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Schauer For Congress</p> <p>Mailing Address P.O. Box 100</p> <p>City Battle Creek State MI Zip Code 49016</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mark H. Schauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D959 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>1500.00</div> </p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Schauer For Congress</p> <p>Mailing Address P.O. Box 100</p> <p>City Battle Creek State MI Zip Code 49016</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mark H. Schauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D960 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>1000.00</div> </p> |

SUBTOTAL of Disbursements This Page (optional)

7500.00

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 PageFOR 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)
Solidarity PAC**A.**Full Name (Last, First, Middle Initial)
Connolly for Congress

Mailing Address P.O. Box 563

City Merrifield State VA Zip Code 22116

Purpose of Disbursement
ContributionCandidate Name
Gerry ConnollyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 11

Transaction ID: D969

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

B.Full Name (Last, First, Middle Initial)
Dina Titus for Congress

Mailing Address PO Box 50614

City Henderson State NV Zip Code 89016

Purpose of Disbursement
ContributionCandidate Name
Dina TitusCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: D962

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

5000.00

C.Full Name (Last, First, Middle Initial)
Carol Shea-Porter for Congress

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866

Purpose of Disbursement
ContributionCandidate Name
Carol Shea-PorterCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: D961

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

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 PageFOR 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)
Solidarity PAC

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Perriello for Congress | Transaction ID: D958 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 306 | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Ivy State VA Zip Code 22945 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Thomas S.P. Perriello | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Hoosiers for Hill | Transaction ID: D957 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 1071 | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Seymour State IN Zip Code 47274 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Baron P Hill | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress | Transaction ID: D955 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 1045 | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Erie State PA Zip Code 16512 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Kathleen Ann Dahlkemper | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Solidarity PAC

A. Full Name (Last, First, Middle Initial)
Martin Heinrich For Congress, Inc.

Mailing Address 2118 Central Avenue SE #71

City State Zip Code
Albuquerque NM 87106

Purpose of Disbursement
Contribution

Candidate Name
Martin Heinrich

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NM District: 01

Transaction ID: D964

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
John Hall for Congress

Mailing Address PO Box 469

City State Zip Code
Beacon NY 12508

Purpose of Disbursement
Contribution

Candidate Name
Joseph John Hall

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: D963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Giffords For Congress

Mailing Address P.O. Box 12886

City State Zip Code
Tucson AZ 85732

Purpose of Disbursement
Contribution

Candidate Name
Gabrielle Giffords

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 08

Transaction ID: D974

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 PageFOR 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)
Solidarity PAC

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Tim Bishop for Congress | Transaction ID: D965 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 437 | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Farmingville State NY Zip Code 11738 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Timothy H Bishop | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Boyd for Congress | Transaction ID: D970 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 15703 | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Centerville State FL Zip Code 32317 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Allen F. Boyd, Jr. | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Kosmas For Congress | Transaction ID: D967 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 1547 | <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>3</td><td></td><td>2</td><td>4</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 | 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City New Smyrna Beach State FL Zip Code 32170 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name Suzanne Kosmas | Category/Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

4500.00

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 18 / 18

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Solidarity PAC

A.

Full Name (Last, First, Middle Initial)

Scott Murphy for Congress

Mailing Address 5 South Side Drive
#224

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement
Contribution

Candidate Name
Scott H. Murphy

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: D971

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Peters for Congress

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303

Purpose of Disbursement
Contribution

Candidate Name
Gary Peters

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Transaction ID: D975

Date of Disbursement

03 / 26 / 2010

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)

41500.00