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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

GRAYMONT PAC (GRAY PAC)

ADDRESS (number and street) ▼ 3950 SOUTH 700 EAST

SUITE 301

☐ Check if different than previously reported. (ACC)

SALT LAKE CITY — CITY ▲ — UT — STATE ▲ — 84107 - — ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C00486751

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 Year-End 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 (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 11 / 23 / 2010 through 12 / 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 Jennifer Holdaway

Signature of Treasurer [signature] Date 01 / 04 / 2011

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

Office Use Only							

FEC FORM 3X
Rev. 12/2004

FE6AN026

11030550642

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

Graymont PAC (GRAYPAC)

Report Covering the Period: From: 11 / 23 / 2010 To: 12 / 31 / 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2010		-00
(b) Cash on Hand at Beginning of Reporting Period	347 50	
(c) Total Receipts (from Line 19)	500 00	850 00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	847 50	850 00
7. Total Disbursements (from Line 31)	500	750
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	842 50	842 50
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	-00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	-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

11030550643

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

Graymont PAC (GRAYPAC)

Report Covering the Period: From: 11 / 23 / 2010 To: 12 / 31 / 2010

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)	500.00	850.00
(ii) Unitemized	— 00	— 00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	500.00	850.00
(b) Political Party Committees	— 00	— 00
(c) Other Political Committees (such as PACs)	— 00	— 00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	500.00	850.00
12. Transfers From Affiliated/Other Party Committees	— 00	— 00
13. All Loans Received	— 00	— 00
14. Loan Repayments Received	— 00	— 00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	— 00	— 00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	— 00	— 00
17. Other Federal Receipts (Dividends, Interest, etc.)	— 00	— 00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	— 00	— 00
(b) Levin Funds (from Schedule H5)	— 00	— 00
(c) Total Transfers (add 18(a) and 18(b))	— 00	— 00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	500.00	850.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	500.00	850.00

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FE6AN026

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	-00	-00
(ii) Non-Federal Share	-00	-00
(b) Other Federal Operating Expenditures	-00	-00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	-00	-00
22. Transfers to Affiliated/Other Party Committees	-00	-00
23. Contributions to Federal Candidates/Committees and Other Political Committees	-00	-00
24. Independent Expenditures (use Schedule E)	-00	-00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	-00	-00
26. Loan Repayments Made	-00	-00
27. Loans Made	-00	-00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	-00	-00
(b) Political Party Committees	-00	-00
(c) Other Political Committees (such as PACs)	-00	-00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	-00	-00
29. Other Disbursements	500	750
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	-00	-00
(ii) "Levin" Share	-00	-00
(b) Federal Election Activity Paid Entirely With Federal Funds	-00	-00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	-00	-00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	500	750
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	500	750

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DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	500.00	850.00
34. Total Contribution Refunds (from Line 28(d))	-0.00	-00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	500.00	850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	-00	-00
37. Offsets to Operating Expenditures (from Line 15, page 3)	-00	-00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	-00	-00

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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 1 OF 1

[X] 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)
Graymont PAC (GRAYPAC)

A.
Full Name (Last, First, Middle Initial): Haggs, Jeffrey B.
Mailing Address: 9752 South Little Cottonwood Place
City: Sandy, State: UT Zip Code: 84092
FEC ID number of contributing federal political committee: C
Name of Employer: Graymont
Occupation: Vice President Marketing
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 50000
Date of Receipt: 12 / 13 / 2010
Amount of Each Receipt this Period: 50000

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 50000

TOTAL This Period (last page this line number only) ▶ 50000

11030550647

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)
Graymont PAC (GRAYPAC)

A.
Full Name (Last, First, Middle Initial): Wells Fargo Bank NA
Mailing Address: PO Box 6995
City: Portland State: OR Zip Code: 97228
Purpose of Disbursement: Monthly Bank Service Fee
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▼ Monthly Bank Service Fee
Date of Disbursement: 11 / 26 / 2010
Amount of Each Disbursement this Period: 250

B.
Full Name (Last, First, Middle Initial): Wells Fargo Bank NA
Mailing Address: PO Box 6995
City: Portland State: OR Zip Code: 97228
Purpose of Disbursement: Monthly Bank Service Fee
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▼ Monthly Bank Service Fee
Date of Disbursement: 12 / 24 / 2010
Amount of Each Disbursement this Period: 250

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 500

TOTAL This Period (last page this line number only) ▶ 500

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SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 1 OF 1

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Graymont PAC (GRAYPAC)

LOAN SOURCE Full Name (Last, First, Middle Initial)
NONE

Mailing Address

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period

TERMS

Date Incurred MM / DD / YYYY | Date Due MM / DD / YYYY | Interest Rate % (apr) | Secured: [ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ —00

TOTALS This Period (last page in this line only) ▶ —00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

11030550649

SCHEDULE C-1 (FEC Form 3X)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for Information found on Page 1 of Schedule C

NAME OF COMMITTEE (In Full): Graymont PAC (GRAYPAC)

FEC IDENTIFICATION NUMBER: C00486751

LENDING INSTITUTION (LENDER)
Full Name: NONE

Amount of Loan

Interest Rate (APR) %

Mailing Address

City State Zip Code

Date Incurred or Established MM / DD / YYYY

Date Due MM / DD / YYYY

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred MM / DD / YYYY

B. If line of credit,
Amount of this Draw:
Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify:

What is the value of this collateral?

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify:

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: MM / DD / YYYY

Location of account:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
Typed Name
Signature

DATE MM / DD / YYYY

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE
Typed Name
Signature
Title

DATE MM / DD / YYYY

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SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one) [X] 9 [ ] 10

NAME OF COMMITTEE (In Full)
Graymont PAC (GRAYPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NONE

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶	-00
2) **TOTALS** This Period (last page this line number only) ▶	-00
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	-00
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶	-00

11030550651

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one)
- [ ] 9
- [x] 10

NAME OF COMMITTEE (In Full)
Graymont PAC (GRAYPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NONE

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶	—00
2) **TOTALS** This Period (last page this line number only) ▶	—00
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	—00
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶	—00

11030550652

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☑ USPS Registered/Certified	Postmarked (R/C) 1/5/11
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☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery ☐	
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	DATE PREPARED 1/24/11

(3/2005)

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